

P05000066814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

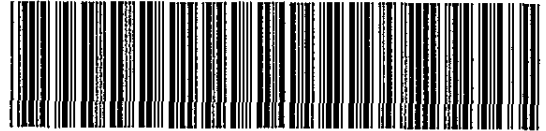
(Document Number)

Certified Copies _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CL 5-9

TRANSMITTAL LETTER

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT: Mild Bill Incorporated

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☒ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Bill L. Myers

Name (Printed or typed)

7114 Carlow Street

Address

New Port Richey, FL 34652

City, State & Zip

727-858-8781

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.

Mild Bill Incorporated
7114 Carlow St., New Port Richey, FL 34653

May 3, 2005

Ms. Carolyn Lewis
New Filings Section
Florida Dept. of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Ref. # W05000016449

Dear Ms. Lewis:

Enclosed are the revised Articles of Incorporation for my business per your letter of March 31. I am also enclosing a copy of the letter you sent. Please let me know if there is anything else I must do to be in accordance with the law.

You may reach me at 727-858-8781 if you need any other information.

Thank you for your help.

Sincerely,

A handwritten signature in black ink, appearing to read "Bill Myers", with a long horizontal flourish extending to the right.

Bill Myers
President



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

March 31, 2005

BILL L. MYERS
7114 CARLOW STREET
NEW PORT RICHEY, FL 34652

SUBJECT: MILD BILL INCORPORATED
Ref. Number: W05000016449

We have received your document for **MILD BILL INCORPORATED** and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

You must list at least one incorporator with a complete business street address.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis
Document Specialist
New Filings Section

Letter Number: 405A00022058

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Mild Bill Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7114 Carlow Street, New Port Richey, FL 34653

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To be in accordance with licensure requirements for the State of Florida for conducting my business.

ARTICLE IV SHARES

The number of shares of stock is:

One (1)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Bill Myers, 7114 Carlow Street, New Port Richey, FL 34653 - President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

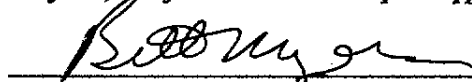
Bill Myers, 7114 Carlow Street, New Port Richey, FL 34653

ARTICLE VII INCORPORATOR

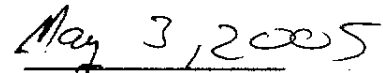
The name and address of the Incorporator is:

Bill Myers, 7114 Carlow Street, New Port Richey, FL 34653

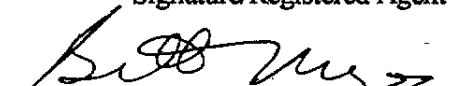
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



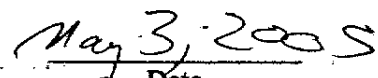
Signature/Registered Agent



Date



Signature/Incorporator



Date

FILED
05 MAR 28 AM 8:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA