

POS000072865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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500052274885

04/29/05--01035--005 **78.75

APPROVED
AND
FILED

05 MAY 19 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FL 32399

APPROVED
AND
FILED

05 MAY 18 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FL 32399

ED 5-19
27683

TRANSMITTAL LETTER

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

SUBJECT: NO FEAR CONSTRUCTION CORP
(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: ASTRID ANDERSEN CPA
Name (Printed or typed)

ANTARA SOLUTIONS INC

1351 BARREL SPRINGS
Address
DELAND FL 32720
City, State & Zip

386 943 9325
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 4, 2005

ASTRID ANDERSEN CPA
1351 BARREL SPRINGS
DELAND, FL 32720

SUBJECT: NO FEAR CONSTRUCTION CORP
Ref. Number: W05000022683

We have received your document for NO FEAR CONSTRUCTION CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6925.

Cynthia Blalock
Document Specialist
New Filings Section

Letter Number: 605A00031902

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:

NO FEAR ENTERPRISES INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PO BOX 740506
ORANGE CITY FL 32774-0506

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO TRANSACT ANY LEGAL CONSTRUCTION BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

15,000 PAR VALUE \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

RICK RANSON PO BOX 740506, ORANGE CITY FL
32774-0506

ARTICLE VI REGISTERED AGENT

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

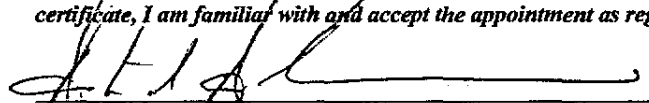
ASTRID ANDERSON CPA
1351 BARRELSPRINGS DELAND FL 32720

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANTARA SOLUTIONS INC
PO BOX 454
LAKE HELEN FL

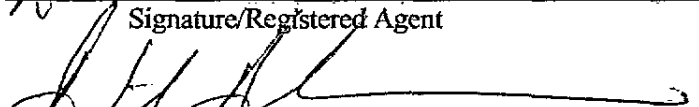
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4/27/05

Date



Signature/Incorporator

4/27/05

Date

APPROVED
AND
FILED

05 MAY 18 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA