

POS000075214

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

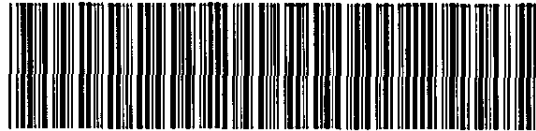
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/13/05--01011--007 \*\*78.75

FILED  
05 MAY 23 PM 12:36  
TALLAHASSEE, FLORIDA  
CLERK OF COURT

5/24/05  
BWL  
WDS-24404

## TRANSMITTAL LETTER

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

SUBJECT: DEFYANT PIERCINGS & TATTOOS, INC  
(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: SHAUN BLAYER  
Name (Printed or typed)

1067 MELADY AVE  
Address

SEBRING FL 33852  
City, State & Zip

( 863) 382-6211  
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 13, 2005

SHAUN BLAYER  
1067 MELADY AVE.  
SEBRING, FL 33852

SUBJECT: DEFYANT PIERCINGS & TATTOOS, INC.  
Ref. Number: W05000024404

Upon receipt of your letter and/or check(s) totaling \$78.75, no document was found. Please return ~~your check along with~~ the proper form.

If you have any further questions concerning your document, please call (850) 245-6840.

Bruce W Kitchens  
Document Specialist  
New Filings Section

Letter Number: 905A00034638

**ARTICLE I NAME**

Chapter 621, F.S. (Profit)

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05 MAY 23 PM 12:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

DEFYANT PIERCINGS & TATTOOS, INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3566 US 27 S, SEBRING, FL 33852

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO PROTECT THE COMPANY AND PEOPLE OF THIS ORGANIZATION. TO ESTABLISH THE ABOVE STATED COMPANY AS A LEGITAMATE BUSINESS IN HIGHLANDS COUNTY, FLORIDA

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

SHAUN BLAYER, PRESIDENT

1607 MELADY AVE

SEBRING FL 33870

Jonathan Clark, Director

1412 Cornelia Ave

Sebring FL 33870

CARRIE BLAYER, VICE PRESIDENT

1607 MLLADY AVE

SEBRING FL 33870

Marcy Cook

6024 Sherman Terrace, Sebring FL 33870

**ARTICLE VI REGISTERED AGENT**

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

CONNIE SARVER-PUGH

211 HILLSIDE DRIVE

LAKE PLACID FL 33852

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

CONNIE SARVER-PUGH

PO BOX 1595

LAKE PLACID FL 33862

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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

Connie Sarver-Pugh  
Signature/Registered Agent

5-3-05  
Date

Connie Sarver-Pugh  
Signature/Incorporator

5-3-05  
Date