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05 MAY 23 AM 8:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05-5-05

TRANSMITTAL LETTER

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

SUBJECT: North American Investigations, 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: North American Investigations, Inc.
Name (Printed or typed)

P.O. Box 271322

Address

Tampa, FL 33688-1322

City, State & Zip

813-962-2435

Daytime Telephone number

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

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:

North American Investigations.

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TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 271322
Tampa. FL 33688

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in every aspect of investigations through its officers, agents and employees who are in good standing and duly licensed. To invest in real estate, tangible and intangible assets..

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):

Thomas Crowley
P.O. Box 271322
Tampa. FL 33688

ARTICLE VI REGISTERED AGENT

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

Thomas Crane
502B W Fletcher Ave.
Tampa. FL 33612

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas Crowley
P.O. Box 271322
Tampa. FL 33688

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



Signature/Incorporator

Date



Date