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(Reques	tor's Name)		
(Address	s)		
(Address	s)		
(City/Sta	te/Zip/Phone #)		
PICK-UP	WAIT MAIL		
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificates of Status		
Special Instructions to Filing Officer:			

B. WHITE JUN 22 2005



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TRANSMITTAL LETTER

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

(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
nal and one (1) copy of the art	ticles of incorporation and	a check for:
\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
	ADDITIONAL CO	Status
ia L. Stone	(Printed or typed)	
1 talih	(Frinca of typod)	
3953 Corona Lane		
	Address	
Sarasota, Florida 34232		
		
	, State & Zip	
	☑ \$78.75 Filing Fee & Certificate of Status ia L. Stone	Filing Fee & Certificate of Status & Certified Copy ADDITIONAL CO ia L. Stone Name (Printed or typed)

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:

Surround Solutions Inc.

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ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 3953 Corona Lane Sarasota, Florida 34232

FILED

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TALLAHASSEE, FLORIES

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Malia L. Stone, 3953 Corona Lane, Sarasota, Florida 34232 President Larry A. Stone, 3953 Corona Lane, Sarasota, Florida 34232 Secretary

ARTICLE VI REGISTERED AGENT

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

Malia L. Stone 3953 Corona Lane Sarasota, Florida 34232

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

Malia L. Stone 3953 Corona Lane Sarasota, Florida 34232

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

Doto

Date

males. J. Ston

Signature/Incorporator

Date