

POS000114512

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000057945730

08/03/05--01005--012 **87.50

FILED
2005 AUG 15 A 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8-18-05
WP



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

August 3, 2005

ROBERT LOISEAU
P. O. BOX 6128
TAMPA, FL 33608

SUBJECT: PARAGON ANALYTICAL AND INTELLIGENCE, INC
Ref. Number: W05000036790

We have received your document for PARAGON ANALYTICAL AND INTELLIGENCE, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must have a Florida street address. A post office box, personal mail box (PMB), or mail drop-box address 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) 245-6995.

Wanda Cunningham
Document Specialist
New Filings Section

Letter Number: 505A00050150

TRANSMITTAL LETTER

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

SUBJECT: PARAGON ANALYTICAL AND INTELLIGENCE, 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: Robert Loiseau
Name (Printed or typed)

PO Box 6128
Address

Tampa FL 33608
City, State & Zip

(813) 871-2797 (current residence) or (813) 827-6176 (current work)

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

**ARTICLES OF INCORPORATION
FOR**

PARAGON ANALYTICAL AND INTELLIGENCE, INC

FILED
2005 AUG 15 A 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FIRST: The undersigned

NAME	ADDRESS
<u>ROBERT LOISEAU</u>	<u>3109 HORATIO ST. #25 TAMPA FL 33609</u>
<u>None</u>	<u>None</u>
<u>None</u>	<u>None</u>
<u>None</u>	<u>None</u>
<u>None</u>	<u>None</u>
<u>None</u>	<u>None</u>

being at least eighteen years of age, do(es) hereby form a corporation under the laws of the State of Florida.

SECOND: The name of the corporation is:

PARAGON ANALYTICAL AND INTELLIGENCE, INC

THIRD: The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the laws and statutes of the State of Florida.

FOURTH: The duration of the corporation is: PERPETUAL

FIFTH: The street address of the principal office of the corporation in Florida is:

3109 HORATIO ST. #25 TAMPA FL 33609

located in the county of HILLSBOROUGH

SIXTH: The name of the registered agent of the corporation in Florida is: ROBERT LOISEAU

whose address is 3109 HORATIO ST. #25 TAMPA FL 33609

SEVENTH: The corporation has authority to issue only one class of shares of stock. The corporation has authority to issue 2000 shares common stock at \$ 0.01 par value per share.

EIGHTH: Indemnification of Officers, Directors, Employees and Agents: The corporation shall indemnify any person who incurs expenses or liabilities by reason of the fact he or she is or was an officer, director, employee or agent of the corporation or is or was serving at the request of the corporation as a director, officer, employee or agent of another corporation, partnership, joint venture, trust or other enterprise. This indemnification shall be mandatory in all circumstances in which indemnification is permitted by the laws or statutes of Florida.

NINTH: Limitation of Liability: To the fullest extent permitted by the laws or statutes of Florida, as the same exists or may hereafter be amended, a director of the corporation shall not be liable to the corporation or its stockholders for

monetary damages for any action taken or any failure to take any action as a director. No repeal, amendment or modification of this article, whether direct or indirect, shall eliminate or reduce its effect with respect to any act or omission of a director of the corporation occurring prior to such repeal, amendment or modification.

IN WITNESS WHEREOF, I have signed these articles and acknowledge the same to be my act on this the

1st day of AUGUST, A.D. 20 05.

SIGNATURE(S) OF INCORPORATOR(S):

Signed: _____	Signed: _____
Printed: <u>ROBERT LOISEAU</u>	Printed: <u>None</u>
Signed: _____	Signed: _____
Printed: <u>None</u>	Printed: <u>None</u>
Signed: _____	Signed: _____
Printed: <u>None</u>	Printed: <u>None</u>

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 OF REGISTERED AGENT:  _____

PRINTED NAME OF REGISTERED AGENT: ROBERT LOISEAU