

P06000028650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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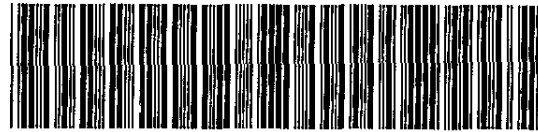
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 FEB 24 PM 4:08
TALLAHASSEE, FLORIDA

T. Burch FEB 27 2006

COVER LETTER

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

SUBJECT: FORROSAD 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: Dwight Forrest
Name (Printed or typed)

710 SW 93rd Ave
Address

Pembroke Pines, FL 33025
City, State & Zip

954-394-8755
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:

Forrosad Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

710 SW 93rd Ave, Pembroke Pines, FL 33025

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all business permitted by law.

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):

Pres/CEO: Dwight Forrest, 710 SW 93rd Ave, Pembroke Pines, FL 33025

Secretary: Maria Forrest, 710 SW 93rd Ave, Pembroke Pines, FL 33025

ARTICLE VI REGISTERED AGENT

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

Dwight Forrest
710 SW 93rd Ave
Pembroke Pines, FL 33025

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dwight Forrest
710 SW 93rd Ave
Pembroke Pines, FL 33025

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

02/20/2006

Date

02/20/2006

Date

FILED
06 FEB 24 PM 4:08
CLERK OF STATE
TALLAHASSEE, FLORIDA