

PO6000035422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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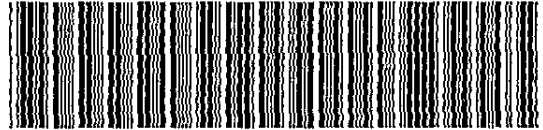
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/09/06--01028--004 **78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2006 MAR 10 2006

COVER LETTER

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

SUBJECT: THE SHARP CORPORATION

(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: LISA SHARP

Name (Printed or typed)

1028 WOODLORE CIRCLE

Address

GULF BREEZE, FL 32563

City, State & Zip

850-449-5900

Daytime Telephone number

RECEIVED
TALLAHASSEE, FLORIDA

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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:

THE SHARP CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1028 WOODLORE CIRCLE
GULF BREEZE, FL 32563

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

REAL ESTATE BROKERAGE

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):

LISA SHARP, PRESIDENT
1028 WOODLORE CIRCLE
GULF BREEZE, FL 32563

ARTICLE VI REGISTERED AGENT

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

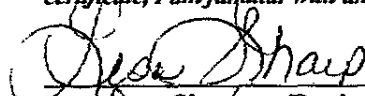
LISA SHARP
1028 WOODLORE CIRCLE
GULF BREEZE, FL 32563

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LISA SHARP
1028 WOODLORE CIRCLE
GULF BREEZE, FL 32563

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

3/2/06

Date

3/2/06

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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