

PO 60000 482/5

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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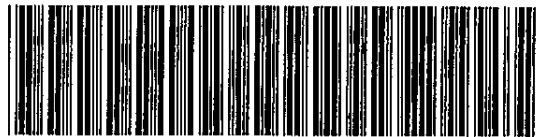
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*D. White*

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06 APR - 3 PM 4:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: John VanSickle, 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: John VanSickle

Name (Printed or typed)

1163 57th Ave. N.

Address

Saint Petersburg, FL 33703

City, State & Zip

(727) 214-8302

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:

John VanSickle, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1163 57th Ave. N.  
Saint Petersburg, FI 33703

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Labor services

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

John VanSickle  
1163 57th Ave. N.  
Saint Petersburg, FI 33703 Title: Labor

**ARTICLE VI REGISTERED AGENT**

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

John VanSickle  
1163 57th Ave. N.  
Saint Petersburg, FI 33703

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

John VanSickle  
1163 57th Ave. N.  
Saint Petersburg, FI 33703

\*\*\*\*\*

*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*

John VanSickle  
Signature/Registered Agent

03-29-06  
Date

John VanSickle  
Signature/Incorporator

03-29-06  
Date

FILED

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA