

JD6000065114

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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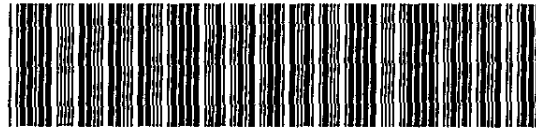
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

5110
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COVER LETTER

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

SUBJECT: STORM PROTECTORS, 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 P KELLY

Name (Printed or typed)

2073 N.E. 9 AVENUE

Address

WILTON MANORS, FL 33305

City, State & Zip

(954) 568-4910

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:

STORM PROTECTORS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2073 N. E. 9 AVENUE, WILTON MANORS, FLORIDA 33305

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES OF STORM SHUTTERS

ARTICLE IV SHARES

The number of shares of stock is:

200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROBERT P. KELLY
2073 N.E. 9 AVENUE
WILTON MANORS, FL 33305
PRESIDENT

ARTICLE VI REGISTERED AGENT

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

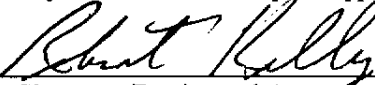
ROBERT P. KELLY
2073 N.E. 9 AVENUE
WILTON MANORS, FL 33305

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT P. KELLY
2073 N.E. 9 AVENUE
WILTON MANORS, FL 33305

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



Signature/Incorporator

5/1/06

Date

5/1/06

Date

FILED
06 MAY -8 AM 8:11
TALLAHASSEE, FLORIDA