

P060000086546

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

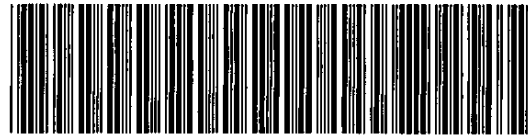
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800076406368

06/26/06--01018--009 **78.75

06 JUN 26 PM 2:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

60602746

COVER LETTER

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

SUBJECT: SIEBE INCORPORATED

(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: **TABS**

Name (Printed or typed)

765 WEST LITTLE CREEK RD 7

Address

NORFOLK VA 23505

City, State & Zip

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)

FILED

06 JUN 26 PM 2:34

ARTICLE I NAME

The name of the corporation shall be:

SIEBE INCORPORATED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1700 S SAN PABLO RD SUITE 317 JACKSONVILLE FL 32224

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL BUSINESS SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

2500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARVIN SIEBE PRESIDENT 1700 S SAN PABLO RD SUITE 317 JACKSONVILLE FL 32224

ARTICLE VI REGISTERED AGENT

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

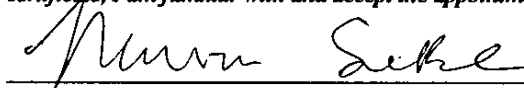
MARVIN SIEBE 1700 S SAN PABLO RD SUITE 317 JACKSONVILLE FL 32224

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARVIN SIEBE 1700 S SAN PABLO RD SUITE 317 JACKSONVILLE FL 32224

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



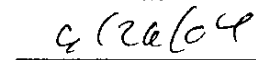
Signature/Registered Agent



Date



Signature/Incorporator



Date