

PD6000108965

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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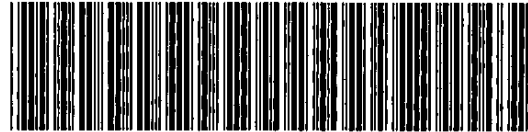
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRP
8/21

COVER LETTER

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

SUBJECT: SECURE HOME SHOOTERS, 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: MICHAEL WHEELUS
Name (Printed or typed)

427 RIVER RD
Address

CARRABELLE, FL 32322
City, State & Zip

850-697-8213
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:

SECURE HOME SHUTTERS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

427 RIVER RD
CARRABELLE, FL 32322

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SELLING & INSTALLING PROTECTIVE STORM SHUTTERS

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MICHAEL WHEELUS - PRES
GARY FORTUNE - SEC TREAS

ARTICLE VI REGISTERED AGENT

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

REGINA SATTERFIELD
427 RIVER RD
CARRABELLE, FL 32322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL WHEELUS
427 RIVER RD
CARRABELLE, FL 32322

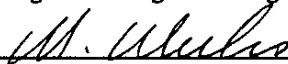
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8/18/06

Date



Signature/Incorporator

8/18/06

Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA