

PD6000/23397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

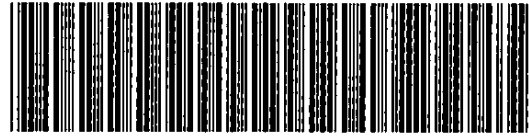
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. WHITE SEP 26 2006

TRANSMITTAL LETTER

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

SUBJECT: COUPE AND ASSOCIATES, 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 R. COUPE
Name (Printed or typed)

16629 86TH ST NORTH
Address

LOXAHATCHEE, FL 33470
City, State & Zip

561-644-7575
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:

COUPE AND ASSOCIATES, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

16629 86TH ST NORTH
LOXA HATCHEE, FL 33470

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SERVICE BUSINESS, WATER TREATMENTS

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 R. COUPE, 16629 86TH ST NORTH, LOXA HATCHEE, FL 33470.
PRESIDENT-TREASURER

AMANDA M. COUPE, 16629 86TH ST NORTH, LOXA HATCHEE, FL 33470
VICE-PRESIDENT-SECRETARY

ARTICLE VI REGISTERED AGENT

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

MICHAEL R. COUPE, 16629 86TH ST NORTH, LOXA HATCHEE, FL 33470

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL R. COUPE, 16629 86TH ST NORTH, LOXA HATCHEE, FL 33470

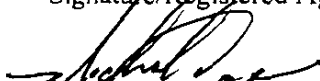
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

9-17-06

Date



Signature/Incorporator

9-17-06

Date