

PD6000/24648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

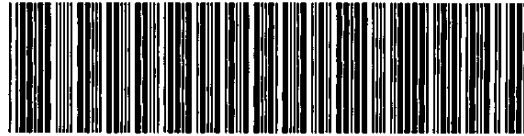
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11/25
9/28

COVER LETTER

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

SUBJECT: Holden Investigation Services, 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: Holden Investigation Services, Inc.

Name (Printed or typed)

1404 Platts Lane

Address

Fort Pierce, Florida 34982

City, State & Zip

772-579-6048

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:

Holden Investigation Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1404 Platts Lane
Fort Pierce, Florida 34982

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Private Investigation Services

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Kurt D. Holden	1404 Platts Lane, Fort Pierce, FL 34982	President
Melanie L Holden	1404 Platts Lane, Fort Pierce, FL 34982	Vice President

ARTICLE VI REGISTERED AGENT

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

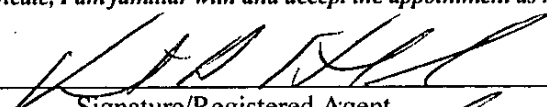
Kurt Holden
1404 Platts Lane
Fort Pierce, Florida 34982

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kurt Holden
1404 Platts Lane
Fort Pierce, Florida 34982

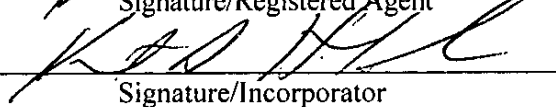
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Date



Signature/Incorporator



Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA