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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

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SECRET/RY OF STATE TALLAHASSEE, FLORIDA

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

SUBJECT: Endie	ess Coatings, Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	l a check for:
\$70.00	\$78.75	\$78.75	✓ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate o
			Status
		ADDITIONAL CO	DPY REQUIRED
		· #=	•
FROM: M	ark C. Odom		
	Name	(Printed or typed)	
	9851 Pine Leaf Lane		
		Address	
	Dade City, Florida 33525		
		State & Zip	
	Oity,	э о г.р	
	813-714-5395		
	Daytime T	elephone number	· · · · · · · · · · · · · · · · · · ·

NOTE: Please provide the original and one copy of the articles.

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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:

Endless Coatings, Inc.

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

Endless Coatings, Inc. 9851 Pine Leaf Lane Dade City, Florida 33525

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful purposes pursuant to Florida laws.

ARTICLE IV SHARES

The number of shares of stock is:

1,000 Shares at \$0.01 Par Value Per Share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Mark C. Odom (President)

9851 Pine Leaf Lane

Dade City, Florida 33525

ARTICLE VI REGISTERED AGENT

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

Mark C. Odom

9851 Pine Leaf Lane

Dade City, Florida 33525

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Mark C. Odom

9851 Pine Leaf Lane

Dade City, Florida 33525

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

Mare Colles
Signature/Registered Agent

Mare Colles
Date

LV-07

Signature/Incorporator

Date