PO7000032322

(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:				





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COVER LETTER

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

SUBJECT:	Stites Mobile Welding, Inc. (PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	<u>JUDE SUFFIX</u>)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	& Certificate of Status
	ADDITIONAL COPY I		DPY, REQUIRED
FROM:	Michael Stites Name (Printed or typed)		
	1735 Northglen Cir Address		
	Middleburg, FL, 32068		
	City, State & Zip		
	904 304-8007		
	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:

Stites Mobile Welding, Inc.

FILED

07 MAR 12 AM 9: 16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1735 Northglen Circle, Middleburg, FL, 32068

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide onsite welding services

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Stites, Michael A. 1735 Northglen Circle, Middleburg, FL, 32068 President Stites, Melanie S. 1735 Northglen Circle, Middleburg, FL, 32068 Secretary Stites, Melanie S. 1735 Northglen Circle, Middleburg, FL, 32068 Treasurer

ARTICLE VI REGISTERED AGENT

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

Stites, Michael A. 1735 Northglen Circle, Middleburg, FL, 32068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Stites, Michael A. 1735 Northglen Circle, Middleburg, FL, 32068

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

Signature/Incorporator

/Date

'Date