P07000058529

(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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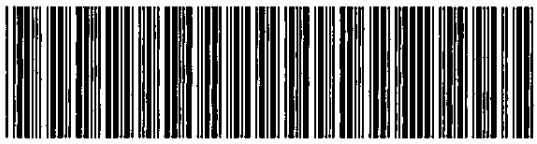

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FILED

2007 MAY 14 A 8:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5-17-07

COVER LETTER

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

SUBJECT: ACME POXY 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: MACYAW ~~ABRAHAM~~
Name (Printed or typed)

4102 NEWTON ST
Address

STUART FL 33497
City, State & Zip

772-370-3224
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)

FILED
2007 MAY 14 A 8:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

ACMEPOXY. INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4102 NEWTON ST. STUART FL 34997

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

QUALIFIED CONSTRUCTION BUSINESS

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):

MARIANN ABRAHAM P
MATTHEW ABRAHAM V.P.
RICK ABRAHAM SEC. TR.
} 4102 NEWTON ST. STUART FL 34997

ARTICLE VI REGISTERED AGENT

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

MARIANN ABRAHAM
4102 NEWTON ST. STUART, FL

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

MARIANN ABRAHAM 4102 NEWTON ST. STUART FL 34997

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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

Marianne Abraham — 5-10-07
Signature of Registered Agent — Date

Marianne Abraham — 5-10-07
Signature of Incorporator — Date