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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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# **COVER LETTER**

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

SUBJECT: SEAIR SERVICE INC				
(PROPOSED CORPORA)  Enclosed are an original and one (1) copy of the artic				
☐ \$70.00	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	Status		
FROM: DUVAN GARCIA	(Printed or typed)	<del></del>		
10469 N 109TH ST				
SEMINOLE, FL 33778	Address State & Zip			
727-831-4840  Daytime T	elephone number			

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

ARTICI	ES OF	<b>INCORPOR</b>	ATION
$\Delta \mathbf{N} \mathbf{I} \mathbf{U} \mathbf{L}$		1110/07/10/1	/A E E

· In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

### ARTICLE I NAME

The name of the corporation shall be:

SEAIR SERVICE INC

07 MAY 21 AM 8: 20

SECRETARY OF STATE TALLAHASSEE, FLORIDA

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

10469 N 109TH ST SEMINOLE , FL 33778

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

# ARTICLE IV SHARES

The number of shares of stock is:

ONE HUNDRED (100)

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DUVAN GARCIA

PRESIDENT

10469 N 109TH ST

SEMINOLE, FL 33778

### ARTICLE VI REGISTERED AGENT

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

DUVAN GARCIA 10469 N 109TH ST SEMINOLE, FL 33778

### ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

DUVAN GARCIA 10469 N 109TH ST SEMINOLE, FL 33778

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

| O5 - 1/7 - 07 |
| Signature Registered Agent | Date

Signature/Incorporator

05-17-07 Date