

P07000068060

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

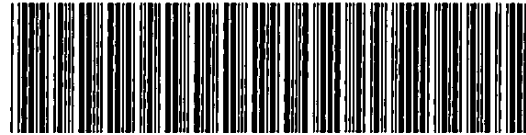
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800104005238

06/08/07--01036--003 \*\*70.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 JUN 11 PM 2:14

APPROVED  
AND  
FILED

B. McKnight JUN 11 2007

## COVER LETTER

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

SUBJECT: Partners Knot 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: Charles Sullivan

Name (Printed or typed)

4503 Bryson Dr.

Address

Jax FL 32210

City, State & Zip

(904) 813-3706

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:

Partners Knot Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4503 Bryson Dr., Jax, FL 32210

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business Management

### ARTICLE IV SHARES

The number of shares of stock is:

75,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Charles Sullivan - President	4503 Bryson Dr., Jax FL 32210
Charles Sullivan - Director	4503 Bryson Dr., Jax FL 32210
Charles Sullivan - Secretary	4503 Bryson Dr., Jax FL 32210
Charles Sullivan - Treasurer	4503 Bryson Dr., Jax FL 32210

### ARTICLE VI REGISTERED AGENT

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

Charles Sullivan 4503 Bryson Dr., Jax, FL 32210

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Charles Sullivan - President 4503 Bryson Dr., Jax, FL 32210

\*\*\*\*\*

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

Charles Sullivan



Signature/Incorporator

Charles Sullivan

07 JUN 07

Date

07 JUN 07

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 JUN 11 PM 2:15

APPROVED  
AND  
FILED