

P07000098709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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2007 SEP -4 PM 3:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch SEP 05 2007

COVER LETTER

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

SUBJECT: FLUID SOLUTIONS, 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: T. KIPP GORDON

Name (Printed or typed)

3041 MOUNMENT RD. SUITE 2

Address

JACKSONVILLE, FL 32225

City, State & Zip

904-642-7456

Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

FLUID SOLUTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3200 POWERS AVE.
JACKSONVILLE, FL 32207

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LEGAL PURPOSE.

ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES, NO PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

T. KIPP GORDON
3041 MOUNMENT RD., SUITE 2
JACKSONVILLE, FL 32225

ARTICLE VII INCORPORATOR

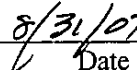
The name and address of the Incorporator is:

T. KIPP GORDON
3041 MOUNMENT RD, SUITE 2
JACKSONVILLE, FL 32225


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



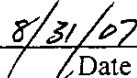
Signature/Registered Agent



Date



Signature/Incorporator



Date