

P07000/05062

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP



WAIT

☐

MAIL

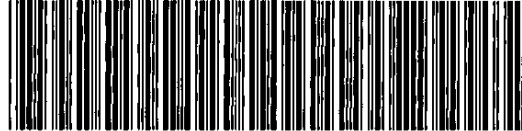
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07 SEP 21 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRB
9/21

COVER LETTER

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

SUBJECT: Swatts Auto World
(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: Derrick L. Swatts
Name (Printed or typed)

55. Hinson Cir.
Address

Havana Fla. 32333
City, State & Zip

(229) 726-8824
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:

Swatts Auto World INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

55. Hinson Cir. P.O. Box 1063
Havanna, Fla. 32333

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any & All Lawful Business

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

p. Derrick L. Swatts

55. Hinson Cir.
Havanna, Fla. 32333

ARTICLE VI REGISTERED AGENT

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

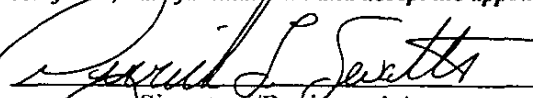
2223 Hwy 27 N.
Havanna, Fla. 32333 Derrick L. Swatts

ARTICLE VII INCORPORATOR

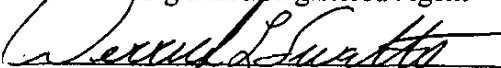
The name and address of the Incorporator is:

Derrick L. Swatts Pres.
55. Hinson Cir.
Havanna, Fla. 32333

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

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07 SEP 21 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9-21-07

Date

9-21-07

Date