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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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

COVER LETTER

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

FILED
2008 MAR -6 PM 12:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: All-Pro Safety Supply & Installations, 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: Michael P. Mettillle

Name (Printed or typed)

214-A Business Park Drive

Address

Lynn Haven, Florida 32444

City, State & Zip

850-832-4238

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:

All-Pro Safety Supply & Installations, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

214-A Business Park Drive

Lynn Haven, Fl. 32444

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The Corporation is organized for the purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares @ par value of \$1.00 per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Director & President:

Michael P. Mettillie

410 Georgia Ave.

Lynn Haven, Fl. 32444

Director & Vice President:

Jarred L. Hobbs

168 Concord Circle

Panama City, Fl. 32405

Secretary:

Amy S. Hobbs

168 Concord Circle

Panama City, Fl. 32405

Treasurer:

Connie F. Mettillie

410 Georgia Ave.

Lynn Haven, Fl.

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ARTICLE VI REGISTERED AGENT

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

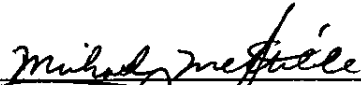
Michael P. Mettillie
410 Georgia Ave.
Lynn Haven, Fl. 32444

ARTICLE VII INCORPORATOR

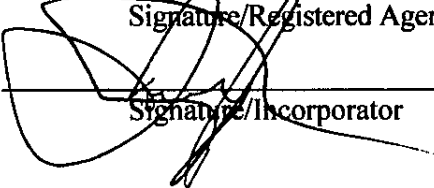
The name and address of the Incorporator is:

Jarred L. Hobbs
168 Concord Circle
Panama City, Fl. 32405

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

3/1/08

Date

3/1/08

Date

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TALLAHASSEE, FLORIDA