

P08000034099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

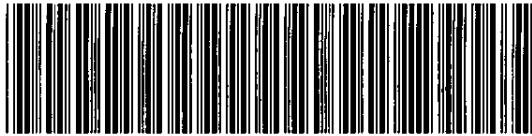
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 APR - 2 PM 4: 38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4/2/08

COVER LETTER

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

SUBJECT: Off Site Professionals Incorporated

(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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Wendy A. Munderville
Name (Printed or typed)

2910 Finch Dr.
Address

Holiday Florida 34690
City, State & Zip

727-942-1027
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:

Off Site Professionals Incorporated

ARTICLE II PRINCIPAL OFFICE

The principle street address and mailing address, if different is:

2910 Finch Drive.
Holiday Florida 34690

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Document Forms and Cleirical Firm

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):

Wendy A. Munderville Owner - Director
2910 Finch Drive.
Holiday Florida 34690

Kenneth D. Combes Secretary
5211 Killarney Court
New Port Richey Florida 34652

ARTICLE VI REGISTERED AGENT

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

Wendy A. Munderville
2910 Finch Drive.
Holiday Florida 34690

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Off Site Professionals Incorporated
2910 Finch Drive
Holiday Florida 34690

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

03.20.08
Date

Signature/Incorporator

Date

FILED
08 APR - 2 PM 4:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA