

PO800008244/

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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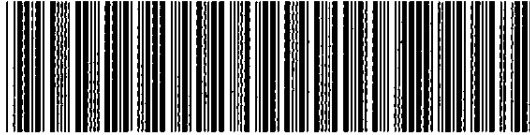
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/05/08--01008--007 **70.00

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08 SEP -5 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10

COVER LETTER

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

SUBJECT: ROBERT ADAMS Corp.
(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: ROBERT ADAMS
Name (Printed or typed)

2890 Hickory Lane
Address

LAKESIDE, FL 33770
City, State & Zip

727-709-3143
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)

FILED

08 SEP -5 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

ROBERT ADAMS CORP.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2890 HICKORY LANE
LARGO, FL 33770

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSULTANT

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROBERT ADAMS PRESIDENT
2890 HICKORY LANE
LARGO, FL 33770

ARTICLE VI REGISTERED AGENT

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

ROBERT ADAMS
2890 HICKORY LANE
LARGO, FL 33770

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT ADAMS
2890 HICKORY LANE
LARGO, FL 33770

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

Robert Adams

Signature/Registered Agent

Robert Adams

Signature/Incorporator

9-2-8

Date

9-2-8

Date