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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

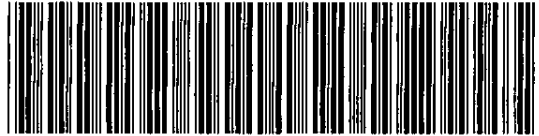
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2008 NOV -3 P 4: 07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NOV -3 2008  
D.A. WHITE

## COVER LETTER

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

SUBJECT: COLBATH ALUMINUM, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: ALLIE COLBATH  
Name (Printed or typed)

4388 SE HAMILTON LN  
Address

STUART, FL 34997  
City, State & Zip

772-634-1959  
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**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

COLBATH ALUMINUM, INC.

**ARTICLE II PRINCIPAL OFFICE**

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

4388 SE HAMILTON LANE  
STUART, FL 34997

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

ALLIE COLBATH 4388 SE HAMILTON LN. STUART, FL 34997 MGR. OF OPERATIONS  
BILLIE COLBATH 4342 SE CHESAPEAKE BAY DR. STUART, FL 34997 MGR. OF INSTALLATIONS

**ARTICLE VI REGISTERED AGENT**

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

ALLIE COLBATH 4388 SE HAMILTON LN. STUART, FL 34997

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

ALLIE COLBATH 4388 SE HAMILTON LN. STUART, FL 34997

\*\*\*\*\*

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

10 28 08  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

10 28 08  
\_\_\_\_\_  
Date