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(Requestor's Name)				
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PICK-UP WAIT MAIL				
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8-10-09

COVER LETTER

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

, 2 ...

SUBJECT:	ROTATING BLIND VALVE, INC.				
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an orig	rinal and one (1) copy of the art	icles of incorporation and	l 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 CO	PY REQUIRED		
FROM:		PRY G. LOFTIS e (Printed or typed)			
		AETANO DRIVE Address			
	ZEPHYR	HILLS, FL 33541 State & Zip			
	813-783-9181 Daytime Telephone number				
	gloftis1cfis@aol.com E-mail address: (to be used for future annual report notification)				
	L-man audress, no de ust	ALIOI IUIUIC AIIIIUAI ICDUIL.	HOUTICAUUUI)		

NOTE: Please provide the original and one copy of the articles.

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

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The name of the corporation shall be:

ROTATING BLIND VALVE, INC.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 35530 GAETANO DRIVE ZEPHYRHILLS, FL 33541

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: SALE OF ROTATING BLIND VALVES

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):

GREGORY G. LOFTIS 35530 GAETANO DRIVE ZEPHYRHILLS, FL 33541

ARTICLE VI REGISTERED AGENT

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

GREGORY G. LOFTIS 35530 GAETANO DRIVE ZEPHYRHILLS, FL 33541

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

GREGORY G. LOFTIS 35530 GAETANO DRIVE ZEPHYRHILLS, FL 33541

Having been named as regis	tered agent to accept	service of process	for the above state	ed corporation	at the
place designated in this cert	ificate, I am familiar	with and accept th	e appointment as	registered agei	nt and
agree to act in this capacity	~				

Gregory H. Lotti	8-5-09
Signature/Registered Agent	Date
Microsy A Lophy	8-5-09
Signature/Incomporator	Date