

P18888813311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

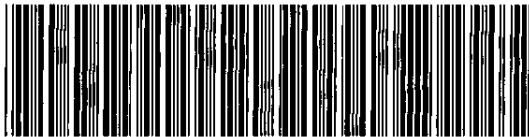
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2010 FEB 11 P 1:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2-12-10
wcc

**John McCoppin, Inc.
3921 NW 110th Ave
Coral Springs, FL 33065**

Date: February 8, 2010

Subject: Filing for Profit Corporate

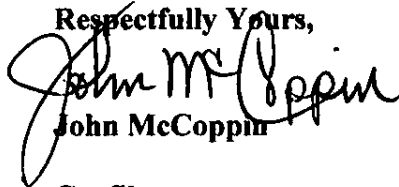
**TO: Department of State
Division of Corporations
P.O.Box 6327
Tallahassee FL 32314**

Dear Sir:

**Please find enclosed cover letter and two (2) copies of Articles of incorporations.
Also included is check #4679 for \$78.75 for filling fee and Certification of Status.**

Should you require additional information, please contact me.

Respectfully Yours,


John McCoppin

Cc: file

COVER LETTER

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

SUBJECT: John McCoppin, 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: John McCoppin
Name (Printed or typed)

3921 NW 110th Ave
Address

Coral Springs FL 33065
City, State & Zip

954 415 3980
Daytime Telephone number

johnmccoppin@bellsouth.net
E-mail address: (to be used for future annual report notification)

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:

John McCoppin, Inc.

ARTICLE II PRINCIPAL OFFICE

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

3921 NW 110th Ave (Same)
Coral Springs, FL 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales

ARTICLE IV SHARES

The number of shares of stock is:

1000 @ .01 each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

John McCoppin President

ARTICLE VI REGISTERED AGENT

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

John McCoppin
3921 NW 110th Ave
Coral Springs, FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John McCoppin
3921 NW 110th Ave
Coral Springs FL 33065

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

John McCoppin John McCoppin
Signature Registered Agent
John McCoppin
Signature Incorporator

Feb. 08, 2010
Date

Feb 08, 2010
Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA