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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3-25-10 9

COVER LETTER

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

SUBJECT: GLENN THEOBALD AND ASSOCIATES 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:

GLENN THEOBALD

Name (Printed or typed)

18035 NW 21 STREET

Address

PEMBROKE PINES, FL 33029

City, State & Zip

(954) 432-6092

Daytime Telephone number

theobaldg@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:

GLENN THEOBALD AND ASSOCIATES INC.

ARTICLE II PRINCIPAL OFFICE

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

18035 NW 21 STREET
PEMBROKE PINES, FL 33029

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRAINING, CONSULTING

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):

GLENN THEOBALD Pres. Tres. Sec.
18035 NW 21 STREET
PEMBROKE PINES, FL 33029

ARTICLE VI REGISTERED AGENT

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

GLENN THEOBALD
18035 NW 21 STREET
PEMBROKE PINES, FL 33029

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GLENN THEOBALD
18035 NW 21 STREET
PEMBROKE PINES, FL 33029

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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

Signature/Incorporator

GLENN THEOBALD

Date

Date