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(Requestor's Name)

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☐ PICK-UP

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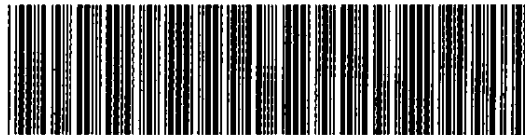
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 JUN - 1 PM 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W10000014445

ch

10-2-10 ch

COVER LETTER

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

SUBJECT: Robert Williams True Shine 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: Robert E. Williams
Name (Printed or typed)

1505 North 42nd Street
Address

Ft. Pierce, Florida 34947
City, State & Zip

(772) 618-3262
Daytime Telephone number

WillRob19662000@yahoo.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 23, 2010

ROBERT E. WILLIAMS
1505 NORTH 42ND STREET
FT. PIERCE, FL 34947

SUBJECT: ROBERT WILLIAMS TRUE SHINE INC.
Ref. Number: W10000014445

FILED
10 APR - 7 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ROBERT WILLIAMS TRUE SHINE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 810A00007151



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
10 JUN -1 PM 1:22
DIVISION OF CORPORATIONS

April 8, 2010

ROBERT E. WILLIAMS **2ND REJECTION**
1505 NORTH 42ND STREET
FT. PIERCE, FL 34947

SUBJECT: ROBERT WILLIAMS TRUE SHINE INC.
Ref. Number: W10000014445

We have received your document for ROBERT WILLIAMS TRUE SHINE INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 810A00007151

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:

Robert Williams True Shine Inc.

ARTICLE II PRINCIPAL OFFICE

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

1505 N. 42nd Street, Ft. Pierce, FL 34947

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Mobile Detailing, pressure washing and cleaning services

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Robert Williams 1505 N. 42nd St., Ft. Pierce, FL 34947

Diane Williams 1505 N. 42nd St., Ft. Pierce, FL 34947

ARTICLE VI REGISTERED AGENT

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

Robert Williams 1505 N. 42nd St., Ft. Pierce, FL 34947

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Robert Williams
1505 N. 42nd Street Ft. Pierce, FL 34947

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 Williams

Signature/Registered Agent

Robert Williams

Signature/Incorporator

05-26-10

Date

05-26-10

Date

FILED
10 JUN 1 PM 12:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA