

P10000046416

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

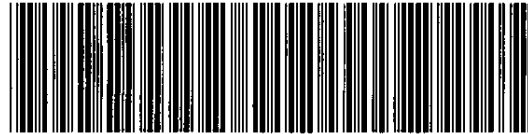
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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JUN -2 2010
D. A. WHITE

COVER LETTER

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

SUBJECT: Professor Paint Contractors 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: Matthew Cain
Name (Printed or typed)

3882 Star leaf rd.
Address

JACKSONVILLE FL, 32210
City, State & Zip

904 838-5305
Daytime Telephone number

8intheside2 @ Comcast.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:

PROFESSOR PAINT INC

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SECRETARY OF STATE

FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

3882 Star leaf Rd.
JAX, FL 32210

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Carry out multiple varieties of
Painting, Coatings, Decor

ARTICLE IV SHARES

The number of shares of stock is:

50 % Matthew Cain
100 shares 50 % Kristin Nice

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

VP/Co-owner KRISTIN NICE
3882 Star leaf rd.
JAX, FL 32210

Matthew Cain
3882 Star leaf rd.
JAX FL 32210
President/owner

ARTICLE VI REGISTERED AGENT

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

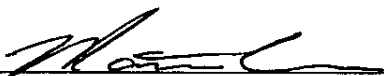
Matthew Cain
3882 Star leaf rd.
JAX FL, 32210

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Matthew Cain
3882 Star leaf rd.
JAX FL 32210

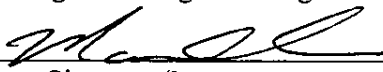
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

05-24-10

Date



Signature/Incorporator

05-24-10

Date