

P10000087567

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

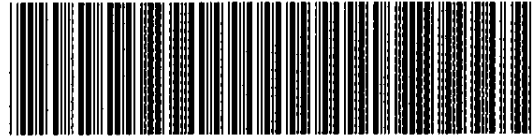
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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OCT 25 PM 3:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ps 10/27/10

## COVER LETTER

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

SUBJECT: Superior Blinds & Shutters 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: Alexander Estremera  
Name (Printed or typed)

8232 Settlers Creek Loop  
Address

Lakeland, FL 33810-5363  
City, State & Zip

863- 529- 8836 (cell)  
Daytime Telephone number

Alex-yankees @ msn. com  
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: Superior Blinds & Shutters Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
8232 Settlers Creek Loop  
Lakeland, Fl 33810

Mailing address, if different is:  
8232 Settlers Creek Loop  
Lakeland, Fl 33810

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and All Lawful Business

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Alexander Estremera  
Address: 8232 Settlers Creek Loop  
Lakeland, Fl 33810

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

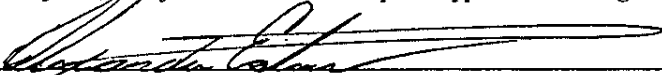
Name: Alexander Estremera  
Address: 8232 Settlers Creek Loop  
Lakeland, Fl 33810

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Alexander Estremera  
Address: 8232 Settlers Creek Loop  
Lakeland, Fl 33810

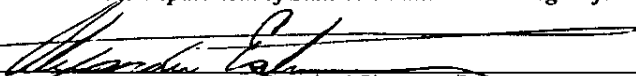
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Required Signature/Registered Agent

\_\_\_\_\_  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*



Required Signature/Incorporator

\_\_\_\_\_  
Date