

P10000088501

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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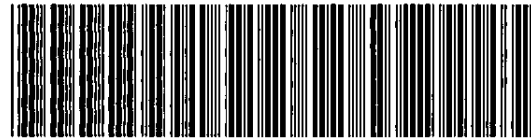
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/26/10--01008--007 **78.75

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2010 OCT 26 PM 2:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Bureh NOV 1 2010.

COVER LETTER

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

SUBJECT: SealCoat Florida, 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: Remington Sherwood

Name (Printed or typed)

164 Triangle Ave.

Address

Orlando, FL 32806

City, State & Zip

321-385-7235

Daytime Telephone number

sealcoatfl@gmail.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

SealCoat Florida, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
1641 Triangle Ave
Orlando, FL 32806

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any lawful purpose.

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000 shares of common stock, no preferred stock

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Remington Sherwood, PST
Address: 1641 Triangle Ave
Orlando, FL 32806

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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


Name: Remington Sherwood
Address: 1641 Triangle Ave
Orlando, FL 32806

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Remington Sherwood
Address: 1641 Triangle Ave
Orlando, FL 32806

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

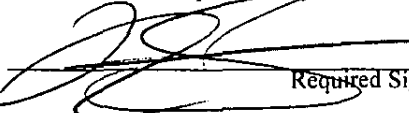


Required Signature/Registered Agent

10/20/10

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

10/20/10

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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