

PI00000089861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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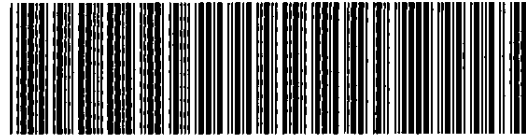
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: WJ Stickles, 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: William J Stickles
Name (Printed or typed)

4140 Mesa Dr
Address

New Port Richey, FL 34653
City, State & Zip

727-232-1771
Daytime Telephone number

Kyosanim@oldsmarmartialarts.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: WJ Stickles, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
4140 Mesa Dr
New Port Richey, Fl
34653

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any business entity

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Stickles, CEO
Address: 4140 Mesa Dr
New Port Richey, Fl 34653

Name and Title: Susan Stickles, Vice President
Address: 4140 Mesa Dr
New Port Richey, Fl 34653

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: Susan Stickles
Address: 4140 Mesa Dr
New Port Richey, Fl 34653

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Susan Stickles
Address: 4140 Mesa Dr
New Port Richey, Fl 34653

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

Susan Stickles
Required Signature/Registered Agent

10/28/10
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.

Susan Stickles
Required Signature/Incorporator

10/28/10
Date

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