

P10000103645

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Michael Hamilton
AUTHORIZATION BY PHONE TO

add effective date
of *1/1/11*

PS

D. *PS*

Office Use Only



300188925773

EFFECTIVE DATE *1-1-11*

12/27/10--01041--014 **78.75

FILED
10 DEC 27 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PS 12/27/10

COVER LETTER

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

SUBJECT: Hamilton Investigative Services Corp.,
(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: Michael L. Hamilton "Effective Date 1/1/11"
Name (Printed or typed)

1310 Ocean Reef Rd.
Address

Wesley Chapel, FL. 33544
City, State & Zip

813 907-1476
Daytime Telephone number

onepi23@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

The name of the corporation shall be: **Hamilton Investigative Services Corp.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1310 Ocean Reef Rd.
Wesley Chapel, FL 33544

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any And All Lawful Business

EFFECTIVE DATE **1-1-11**

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Michael L. Hamilton President**
Address: **1310 Ocean Reef Rd.**
Wesley Chapel, FL 33544

Name and Title: _____
Address: _____

Name and Title: **Michele A. Hamilton Vice President**
Address: **1310 Ocean Reef Rd.**
Wesley Chapel, FL 33544

Name and Title: _____
Address: _____

Name and Title: **Michael J. Hamilton Vice President**
Address: **1310 Ocean Reef Rd.**
Wesley Chapel, FL 33544

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: **Michael L. Hamilton**
Address: **1310 Ocean Reef Rd.**
Wesley Chapel, FL 33544

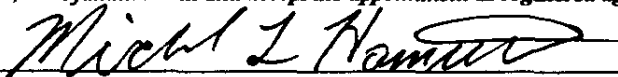
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Michael L. Hamilton**
Address: **1310 Ocean Reef Rd.**
Wesley Chapel, FL 33544

EFFECTIVE DATE - JANUARY 1, 2011.

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

12/21/10

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

12/21/10

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA