

PI 00021151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

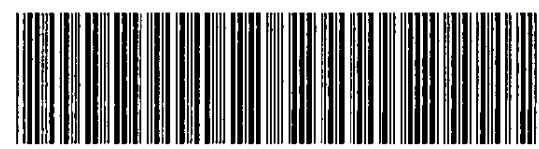
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2011 MAR 01 09:06 AM
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Division of Corporations
Tallahassee Florida

February 22, 2011

To Whom It May Concern:

I am requesting that my corporation name of Hulf Beach Hwy Mini Storage Inc
Be released and I do not retain the name effective immediately.

This is a unanimous choice by the stockholders.

Thank you,

Jaetie Hughes

COVER LETTER

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

SUBJECT: Gulf Beach Hwy Mini Storage Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and check for:

☐

\$70.00
Filing Fee

☒

\$78.75
Filing Fees &
Certificate of Status

☐

\$78.75
Filing Fee
& Certified Copy

☐

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Jacki Hughes

Name (Printed or typed)

6435 161st Rd

Address

Live Oak FL 32060

City, State & Zip

386 252 4576

Daytime Telephone number

diehardchief58@yahoo.com

Email Address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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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: Gulf Beach Hwy Mini Storage, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

3400 GULF BEACH HWY
PENSACOLA FL 32507

mailing address, if different is:

6435 161ST RD
LIVE OAK, FL 32060

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY & ALL legal purpose

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTIONS

Name and Title: VP Fredrick Hughes Name and Title: _____

Address: 6435 161ST RD Address: _____
LIVE OAK FL 32060

Name and Title: Pres. Jacki Hughes Name and Title: _____

Address: 6435 161ST RD Address: _____
LIVE OAK FL

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Jacki Hughes
Address: 6435 161ST RD
LIVE OAK FL 32060

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nettie Davis
Address: 846 SW Main Blvd
LAKE CITY FL 32025

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

Jacki Hughes
Required Signature/Registered Agent

2/22/11
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.

Nettie Davis
Required Signature/Incorporator

2/22/11
Date