

P11000023967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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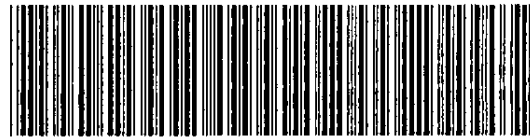
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2011 MAR -9 PM 12:42
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: Suppressive Fire, 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: Anderson L. Triggs

Name (Printed or typed)

2740 SW Martin Downs Blvd., #165

Address

Palm City, FL 34990

City, State & Zip

561-632-7922

Daytime Telephone number

dieselt88@yahoo.com

E-mail address: (to be used for future annual report notification)

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

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TALLAHASSEE, FL 32314

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:

Suppressive Fire, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address:

2740 SW Martin Downs Blvd., #165
Palm City, FL 34990

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any lawful business enterprise permitted under the statutes of Florida, in such cases made and provided.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anderson L. Triggs / President

Address: 2740 SW Martin Downs Blvd., #165
Palm City, FL 34990

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: Anderson L. Triggs

Address: 2740 SW Martin Downs Blvd., #165
Palm City, FL 34990

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Anderson L. Triggs

Address: 2740 SW Martin Downs Blvd., #165
Palm City, FL 34990

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

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TALLAHASSEE, FL 32310
SECRETARY OF STATE

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