

P 110000060352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

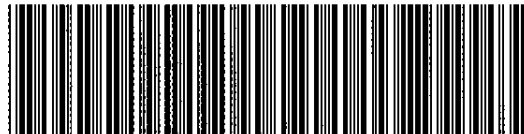
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JF 6/28

## COVER LETTER

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

SUBJECT: **CO2meter, 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: **Ray Hicks**

Name (Printed or typed)

**131 Business Center Drive A-3**

Address

**Ormond Beach, FL 32174**

City, State & Zip

**810-610-3903**

Daytime Telephone number

**irene.hicks.us@gmail.com**

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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:

CO2meter, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

131 Business Center Drive A-3  
Ormond Beach, FL 32174

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

specifically, but not limited to, sales of  
CO2 meters and related items

**ARTICLE IV SHARES**

The number of shares of stock is:

5,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ray Hicks, President

Address: 131 Business Center  
Ormond Beach, FL 32174

Name and Title: Irene Hicks, VP/Treasurer

Address: 131 Business Center  
Ormond Beach, FL 32174

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: Ray Hicks

Address: 131 Business Center  
Ormond Beach, FL 32174

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Ray Hicks

Address: 131 Business Center  
Ormond Beach, FL 32174

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, FLORIDA

6/21/2001

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