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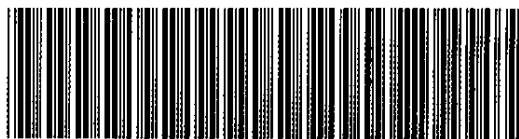
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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7/13/11

COVER LETTER

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

SUBJECT: Flightless, 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: Jonathan M. Brinley

Name (Printed or typed)

626 Hawkes Island Dr.

Address

Fleming Island, FL 32003

City, State & Zip

765-274-0342

Daytime Telephone number

jbrinley@flightless.us

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

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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: Flightless, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
626 Hawkes Island Dr.
Fleming Island, FL 32003

Mailing address 2011 JUL 13 PM 1:28

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To operate legally and lawfully as a corporation in the state of Florida

ARTICLE IV SHARES

The number of shares of stock is: 65536

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Stephanie J. Brinley, President
Address: 626 Hawkes Island Dr.
Fleming Island, FL 32003

Name and Title: _____
Address: _____

Name and Title: Jonathan M. Brinley, Vice-President
Address: 626 Hawkes Island Dr.
Fleming Island, FL 32003

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: Jonathan M. Brinley
Address: 626 Hawkes Island Dr.
Fleming Island, FL 32003

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jonathan M. Brinley
Address: 626 Hawkes Island Dr.
Fleming Island, FL 32003

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

Jonathan M Brinley

Required Signature/Registered Agent

2011-07-11

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.

Jonathan M Brinley

Required Signature/Incorporator

2011-07-11

Date