

P11000073123

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

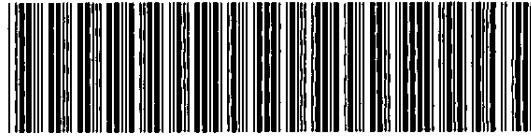
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11 AUG 16 AM 10:36

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

11 AUG 16 AM 10:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

for 8/16/11

COVER LETTER

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

SUBJECT: Superior Packing Services 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: Ken W. Dowell

Name (Printed or typed)

552 S.W. Whitetail Circle

Address

Lake City, Florida 32024

City, State & Zip

386-697-5905

Daytime Telephone number

kennydowell@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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Superior Packing Services Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
552 S.W. Whitetail Circle
Lake City, Florida 32024

Mailing address, if different from principal office address:

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional packing and crating as a third party service for moving companies.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ken W. Dowell President
Address: 552 S.W. Whitetail Circle
Lake City, Florida 32024

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: Ken W. Dowell
Address: 552 S.W. Whitetail Circle
Lake City, Florida 32024

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ken W. Dowell
Address: 552 S.W. Whitetail Circle
Lake City, Florida 32024

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

Ken W Dowell

Required Signature/Registered Agent

08/12/2011

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.

Ken W Dowell

Required Signature/Incorporator

08/12/2011

Date