

P11000074052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

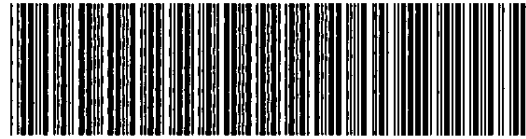
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

corrected share amount
per customers request
md 8/18

Office Use Only



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08/17/11--01022--002 **78.75

FILED
2011 AUG 18 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W11-43127

COVER LETTER

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

SUBJECT: Tradewind Sinding 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: James Arnot

Name (Printed or typed)

1143 Maple Creek Court

Address

Altamonte Springs FL 32714

City, State & Zip

1-407-929-1448

Daytime Telephone number

jvillejim@gmail.com

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

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

RECEIVED
AUG 18 2004
TALLAHASSEE, FL 32314

2PM AUG 18 PM 3:45

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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

Tradewind Siding Inc
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
1143 maple Creek Court
Altamonte Springs Fl 32714

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Siding, Painting,

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Arnot Owner
Address: 1143 maple creek
Altamonte Springs, Fl 32714

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: James Arnot
Address: 1143 Maple Creek Court
Altamonte Springs, Fl 32714

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James Arnot
Address: 1143 Maple Creek Court
Altamonte Springs, Fl 32714

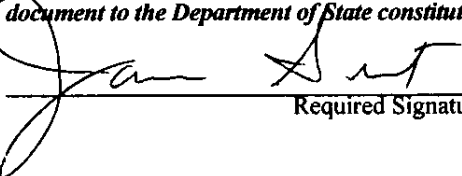
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

7-23-2011
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.



Required Signature/Incorporator

7-23-2011
Date

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TALLAHASSEE, FL 32301
DEPARTMENT OF STATE