

P11000084914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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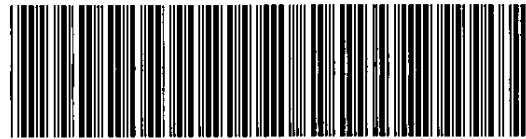
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 SEP 27 PM 4:39

FILED

T. Burch SEP 28 2011

COVER LETTER

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

SUBJECT: Solid Tires Direct, 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: Richard R. Smyth
Name (Printed or typed)

2063 SW Ashton Way
Address

Palm City, FL 34990
City, State & Zip

772-408-3374
Daytime Telephone number

rsmyth@countryclubwebsites.com
E-mail address: (to be used for future annual report notification)

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: Solid Tires Direct, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
2063 SW Ashton Way
Palm City, FL 34990

Mailing address, if different is:
P.O. Box 2165
Palm City, FL 34991

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional corporation to conduct business for profit.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Richard R. Smyth, Director
Address: 2063 SW Ashton Way
Palm City, FL 34990

Name and Title: Marianna Papa, Director
Address: 2046 SW Ashton Way
Palm City, FL 34990

Name and Title: Valerie L. Smyth, Director
Address: 2063 SW Ashton Way
Palm City, FL 34990

Name and Title: _____
Address: _____

Name and Title: Frank A. Papa, Director
Address: 2046 SW Ashton Way
Palm City, FL 34990

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: Richard R. Smyth
Address: 2063 SW Ashton Way
Palm City, FL 34990

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Richard R. Smyth
Address: 2063 SW Ashton Way
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

9/23/11

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.



Required Signature/Incorporator

9/23/11

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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