

PI1000087335

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

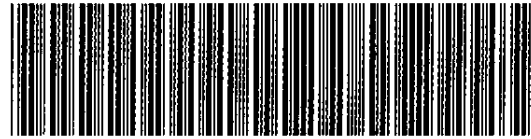
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 OCT -5 PM 1:19

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AND
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1/4

COVER LETTER

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

SUBJECT:

(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: David Hill

Name (Printed or typed)

2804 NW 58th Blvd.

Address

Gainesville, FL 32606

City, State & Zip

352-371-4352

Daytime Telephone number

f512trnut@yahoo.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 Hillcom Holdings, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
2804 NW 58th Blvd
Gainesville, FL 32606

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To conduct any lawful business

ARTICLE IV CAPITALIZATION
The number of shares of stock is 1000000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:
Address: David Hill, President
2804 NW 58th Blvd
Gainesville, FL 32606

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: David Hill
Address: 2804 NW 58th Blvd
Gainesville, FL 32606

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: David Hill
Address: 2804 NW 58th Blvd
Gainesville, FL 32606

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

9/29/2011

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

9/29/2011

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
AND
FILED