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DIVISION OF CORPORATIONS
2011 OCT 24 PM 3:47

gr 10/26/11

COVER LETTER

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

SUBJECT: Suncoast Tool Repair, 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: Michael Champion

Name (Printed or typed)

7024 Aurora Drive

Address

New Port Richey FL 34653

City, State & Zip

727-515-5045

Daytime Telephone number

suncoasttool@cs.com

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: Suncoast Tool Repair, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address
7024 Aurora Drive
New Port Richey, FL 34653

Mailing address, if different is:

same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
to conduct business repairing power tools for customers.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Champion, President
Address: 2447 Winsloe Drive
Trinity, FL 34655

Name and Title: _____
Address: _____

Name and Title: Chris Champion, Vice President
Address: 2447 Winsloe Drive
Trinity, FL 34655

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: Michael Champion
Address: 2447 Winsloe Drive
Trinity, FL 34655

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Chris Champion
Address: 2447 Winsloe Drive
Trinity, FL 34655

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

Michael Champion
Required Signature/Registered Agent

10/18/11
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.

Chris Champion
Required Signature/Incorporator

10/18/11
Date