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Effective Date Jan. 01, 2011

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch NOV 9 2011

COVER LETTER

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

SUBJECT: PRECISION VALVE PRODUCTS, 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: ANTHONY J. FARRELL
Name (Printed or typed)

4321 DES PLAINES DRIVE
Address

SARASOTA, FLORIDA 34233
City, State & Zip

941-923-4039
Daytime Telephone number

TRICOL@AOL.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: PRECISION VALVE PRODUCTS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
4321 DES PLAINES DR
SARASOTA
FLORIDA 34233

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO MANUFACTURE STEEL COMPONENTS FOR SALE TO THE HYDRAULIC AND AUTOMOTIVE INDUSTRIES.

Effective Date

ARTICLE IV SHARES

The number of shares of stock is: 100

Effective Date Jan. 01, 2011

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ANTHONY FARRELL, PRESIDENT
Address: 4321 DES PLAINES DR
SARASOTA
FLORIDA 34233

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: ANTHONY FARRELL
Address: 4321 DES PLAINES DR
SARASOTA FL 34233

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ANTHONY FARRELL
Address: 4321 DES PLAINES DR
SARASOTA FL 34233

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

Anthony Farrell
Required Signature/Registered Agent

Nov 3rd 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.

Anthony Farrell
Required Signature/Incorporator

Nov 3rd 2011
Date

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TALLAHASSEE, FLORIDA

SEPARATE ARTICLE

EFFECTIVE DATE FOR

ARTICLES OF INCORPORATION
IS REQUESTED FOR

JANUARY 1ST 2012
(01-01-2012)

SIGNED

Anthony Farrell

FILED
2013 NOV -8 PM 4:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA