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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Firepower Fireworks 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: AL Mueller
Name (Printed or typed)

5753 Elizabeth Ann Way
Address

Fort Myers FL, 33912
City, State & Zip

2392296582
Daytime Telephone number

almueller123@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: **Firepower Fireworks Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
5753 Elizabeth Ann Way
Fort Myers FL 33912

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

For the retail and or wholesale trade of Fireworks, 1.4g un0336 class "c"

ARTICLE IV SHARES

The number of shares of stock is: **10,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | |
|---|-----------------------|
| Name and Title: AL Mueller/President | Name and Title: _____ |
| Address: 5753 Elizabeth Ann Way | Address: _____ |
| Fort Myers FL 33912 | _____ |

| | |
|--|-----------------------|
| Name and Title: Scott Holler/Vice President | Name and Title: _____ |
| Address: 1325 NE Juanita Pl | Address: _____ |
| Cape Coral FL 33904 | _____ |

| | |
|-----------------------|-----------------------|
| Name and Title: _____ | Name and Title: _____ |
| Address: _____ | Address: _____ |
| _____ | _____ |

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: **AL Mueller**
Address: **5753 Elizabeth Ann Way**
Fort Myers FL 33912

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: **Al Mueller**
Address: **5753 Elizabeth Ann Way**
Fort Myers FL 33912

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

1132011

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

1132011

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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