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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Speedy Mount & Tires, 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: Thomas J. Raulerson

Name (Printed or typed)

39803 N. W. 19th Avenue

Address

Okeechobee, FL 34972

City, State & Zip

(863) 261-3377

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Speedy Mount & Tires, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
5243 US 27 South
Sebring, FL 33870

Mailing address, if different is:
39803 NW 19th Avenue
Okeechobee, FL 34972

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To conduct a business which mounts and repairs farm and nonfarm tires

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Thomas J. Raulerson, President Name and Title: _____
Address: 39803 NW 19th Avenue Address: _____
Okeechobee, FL 34972

Name and Title: Shana J. Raulerson, Director Name and Title: _____
Address: 39803 NW 19th Avenue Address: _____
Okeechobee, FL 34972

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: Thomas J. Raulerson
Address: 39803 NW 19th Avenue
Okeechobee, FL 34972

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Thomas J. Raulerson
Address: 39803 NW 19th Avenue
Okeechobee, FL 34972

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

Thomas J. Raulerson
Required Signature/Registered Agent

11/16/2011
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.

Thomas J. Raulerson
Required Signature/Incorporator

11/16/2011
Date

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