

P/2000001681

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

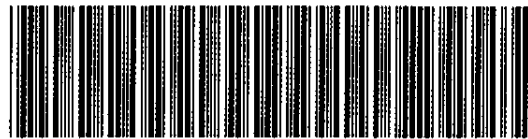
Certificates of Status _____

Special Instructions to Filing Officer:

ADDED CORPORATE NAME
TO ARTICLE I.

K 01/06/11

Office Use Only



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01/05/12--01003--005 **78.75

FILED
12 JAN -5 PM 5:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 01/06/11

COVER LETTER

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

SUBJECT: PLATINUM GUN 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: SHAWN ATCHLEY
Name (Printed or typed)
8640 Phillips Hwy Suite 1
Address
JACKSONVILLE FL 32256
City, State & Zip
904 738 3465
Daytime Telephone number
SHAWN.ATCHLEY@GMAIL.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: PLATINUM GUN INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

8640 Phillips Hwy #1
JACKSONVILLE FL 32256

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SELLING GUNS AND AMMO.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SHAWN ATCHLEY PRES.

Address: 5004 FREMONT ST.
JACKSONVILLE FL 32210

Name and Title: _____

Address: _____

Name and Title: TRAVIS GUERRA VP

Address: 8640 Phillips Hwy #2
JACKSONVILLE, FL 32256

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: TRAVIS GUERRA

Address: 8640 Phillips Hwy #2
JACKSONVILLE, FL 32256

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TRAVIS GUERRA

Address: 8640 Phillips Hwy #2
JACKSONVILLE FL 32256

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

12/29/11
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.

Required Signature/Incorporator

12/29/11
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA