

12000002042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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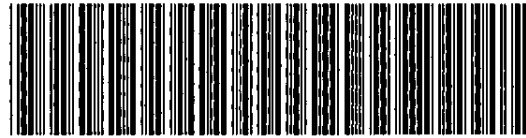
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 JAN -6 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Stivers JAN 09 2012

COVER LETTER

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

SUBJECT: American Graphics Company

(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: Beverly Stapleton

Name (Printed or typed)

318 N. Broad St.

Address

Brooksville, FL 34601

City, State & Zip

352-345-4842

Daytime Telephone number

beverly@americangfx.com

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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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:

American Graphics Company

ARTICLE II PRINCIPAL OFFICE

Principal street address

318 N. Broad St.
Brooksville, FL 34601

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Beverly Stapleton-President
Address: 318 N. Broad St
Brooksville, FL 34601

Name and Title: Martin Stapleton-Vice President
Address: 318 N. Broad St
Brooksville, FL 34601

Name and Title: Beverly Stapleton-Treasurer
Address: 318 N. Broad St
Brooksville, FL 34601

Name and Title: Martin Stapleton - Secretary
Address: 318 N. Broad St
Brooksville, FL 34601

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: Beverly Stapleton
Address: 318 N. Broad St
Brooksville, FL 34601

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Beverly Stapleton
Address: 318 N. Broad St
Brooksville, FL 34601

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

B. Stapleton

Required Signature/Registered Agent

1-3-12
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.

B. Stapleton

Required Signature/Incorporator

1-3-12
Date

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