

P12000002085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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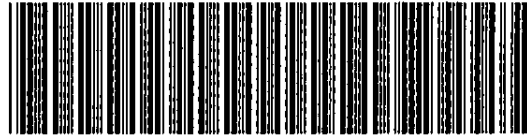
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
1/9/12

## COVER LETTER

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

SUBJECT: COOPS MAINTENANCE 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: ELIZABETH F COOPER

Name (Printed or typed)

2122 GROUND SQUIRREL DR

Address

NEW PORT RICHEY FL 34655

City, State & Zip

727 376 3458

Daytime Telephone number

cooperef@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** COOPS MAINTENANCE INC  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
2122 GROUND SQUIRREL DR  
NEW PORT RICHEY FL 34655

Mailing address, if different is:

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
TO CONDUCT BUSINESS IN THE STATE OF FLORIDA

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

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: <u>ELIZABETH F COOPER</u>	Name and Title: _____
Address: <u>2122 GROUND SQUIRREL DR</u>	Address: _____
<u>NEW PORT RICHEY FL 34655</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
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: ELIZABETH F COOPER  
Address: 2122 GROUND SQUIRREL DR  
NEW PORT RICHEY FL 34655

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: ELIZABETH F COOPER  
Address: 2122 GROUND SQUIRREL DR  
NEW PORT RICHEY FL 34655

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

X Elizabeth F Cooper  
Required Signature/Registered Agent

01/04/2012  
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.

X Elizabeth F Cooper  
Required Signature/Incorporator

01/04/2012  
Date

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12 JAN - 6 PM 1:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA