

P 12000005663

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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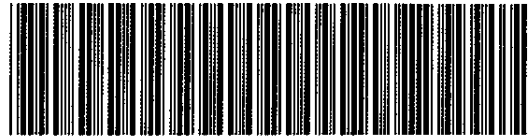
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 JAN 17 PM 1:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

g 1/18/12

COVER LETTER

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

SUBJECT: FLORIDA PIPE REPAIR, 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: JAY D. PALMER, as agent

Name (Printed or typed)

9835-16 Lake Worth Rd. suite #328

Address

Lake Worth, Florida 33467

City, State & Zip

561-753-0880

Daytime Telephone number

jaypalmer155@comcast.net

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

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TALLAHASSEE, FLORIDA

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 FLORIDA PIPE REPAIR Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
9835-16 LAKE WORTH RD.
SUITE #328
LAKE WORTH FLORIDA 33467

Mailing address, if different
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A for profit chapter S corp. to provide plumbing repairs and alternate methods for repairs of plumbing systems in residential, commercial, and industrial applications.

ARTICLE IV SHARES 100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jay D Palmer President
Address: 9835-16 LAKE WORTH RD
SUITE #328
LAKE WORTH FLORIDA 33467

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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:

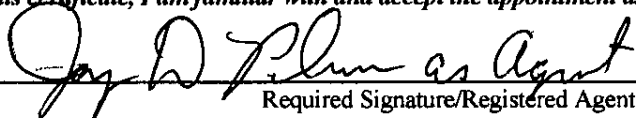
Name: JAY D PALMER
Address: 9835-16 LAKE WORTH RD #328
LAKE WORTH FLORIDA 33467

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JAY D PALMER
Address: 9835-16 LAKE WORTH RD #328
LAKE WORTH FLORIDA 33467

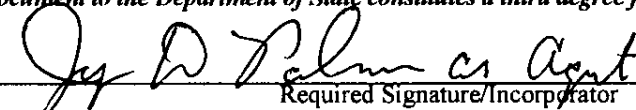
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

01/11/2012

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.


Required Signature/Incorporator

01/11/2012

Date