

P12000007880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

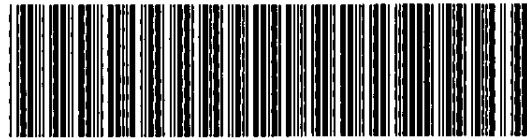
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700218105707

01/23/12--01028--009 **78.75

FILED
2012 JAN 23 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 24 2012

COVER LETTER

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

SUBJECT: **HADSOCK, 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: **HADSOCK, INC**

Name (Printed or typed)

12644 PALM BEACH BLVD

Address

FORT MYERS, FL 33905

City, State & Zip

239-690-1511

Daytime Telephone number

SHADSOCK@YAHOO.COM

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

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

2012 JAN 23 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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: **HADSOCK, INC**

ARTICLE II PRINCIPAL OFFICE

Principal street address
12644 PALM BEACH BLVD
FORT MYERS, FL 33905

Mailing address, if different is:

12644 PALM BEACH BLVD
FORT MYERS, FL 33905

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Engaging in the transaction of any and all business activities permitted under the laws of Florida and the United States of America.

ARTICLE IV SHARES

The number of shares of stock is: One Hundred (100) valued at \$1.00 Per share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **SELLIA HADSOCK, PRESIDENT**
Address: **12644 PALM BEACH BLVD**
FORT MYERS, FL 33905

Name and Title: _____
Address: _____

Name and Title: **CHRISTOPHER L. HADSOCK VICE PRESIDENT**
Address: **12644 PALM BEACH BLVD**
FORT MYERS, FL 33905

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: **SELLIA HADSOCK**
Address: **12644 PALM BEACH BLVD**
FORT MYERS, FL 33905

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **SELLIA HADSOCK**
Address: **12644 PALM BEACH BLVD**
FORT MYERS, FL 33905

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

Sellia Hadsock

Required Signature/Registered Agent

1-21-12

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.

Sellia Hadsock

Required Signature/Incorporator

1-21-12

Date

FILED
2012 JAN 23 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA