

P12000026136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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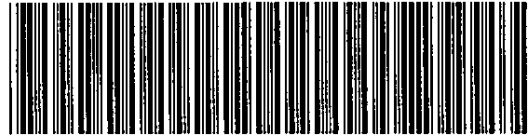
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 MAR 15 AM 11:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers MAR 16 2012

COVER LETTER

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

SUBJECT: ORANGE COUNTY OUTBOARDS, 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: GLENN R. LUISI

Name (Printed or typed)

690 LANGTREE ROAD

Address

MOORESVILLE, NC 28117

City, State & Zip

704-895-0626

Daytime Telephone number

grluisi_pa@bellsouth.net

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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 ORANGE COUNTY OUTBOARDS, INC.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
3555 WADING HERON TERRACE
OVIEDO, FL 32766

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation may transact any and all lawful business for which corporations may be incorporated under the Laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	TIMOTHY J. LACH - PRESIDENT	Name and Title:	
Address:	3555 WADING HERON TERRACE	Address:	
	OVIEDO, FL 32766		

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: TIMOTHY J. LACH
Address: 3555 WADING HERON TERRACE
OVIEDO, FL 32766

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TIMOTHY J. LACH
Address: 3555 WADING HERON TERRACE
OVIEDO, FL 32766

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

✓ 2-29-12
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.

✓ 
Required Signature/Incorporator

✓ 2-29-12
Date

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TALLAHASSEE, FLORIDA