

P12000027035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

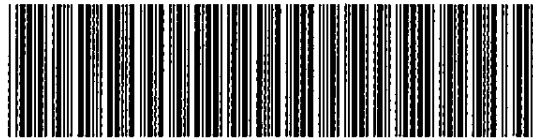
(Business Entity Name)

(Document Number)

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

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12 MAR 19 PM 4:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch MAR 20 2012

**COVER LETTER**

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

**SUBJECT:** MylesLoud Enterprises of S.W. Florida 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

*JUST FILLING FEE*  
*SAJ*

☐ \$78.75 Filing Fee & Certified Copy  
☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status  
**ADDITIONAL COPY REQUIRED**

**FROM:** Scott A. Lathrop

Name (Printed or typed)

8845 Lely Island Circle

Address

Naples, FL, 34113

City, State & Zip

770-757-2399

Daytime Telephone number

mylesloud8@comcast.net

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**

The name of the corporation shall be:

**MylesLoud Enterprises of SW Florida Inc.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**8845 Lely Island Circle**  
**Naples, FL**  
**34113**

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**Any and All Lawful Business**

**ARTICLE IV SHARES**

The number of shares of stock is:

**1500**

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

Name and Title: **Scott A. Lathrop**  
Address: **8845 Lely Island Circle**  
**Naples, FL**  
**34113**

Name and Title: **Director**  
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: **Scott A. Lathrop**  
Address: **8845 Lely Island Circle**  
**Naples, FL 34113**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:


Name: **Scott A. Lathrop**  
Address: **8845 Lely Island Circle**  
**Naples, FL 34113**

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

**04/14/2012**  
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  
**SCOTT A. LATHROP**

**04/14/2012**  
Date