

P/2000027205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

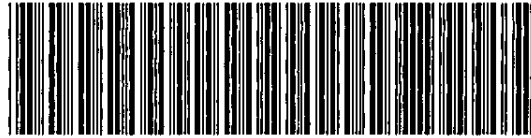
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000224028950

03/19/12--01029--007 **78.75

FILED
12 MAR 19 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 03/20/12

COVER LETTER

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

SUBJECT: Power Swap, 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: Ronald J. Long

Name (Printed or typed)

4820 NE 18th Terrace

Address

Fort Lauderdale, Florida 33308

City, State & Zip

954-829-1350

Daytime Telephone number

vpowellfbm@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

The name of the corporation shall be: Power Swap, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
4820 NE 18th Terrace
Fort Lauderdale, Florida 33308

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
installation and maintenance of back up battery systems

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Ronald J. Long, President/Secretary</u>	Name and Title: _____
Address: <u>4820 NE 18th Terrace</u>	Address: _____
<u>Fort Lauderdale, Florida 33308</u>	_____

Name and Title: <u>Vicki Powell, Vice President/Treasurer</u>	Name and Title: _____
Address: <u>4820 NE 18th Terrace</u>	Address: _____
<u>Fort Lauderdale, Florida 33308</u>	_____

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: Vicki Powell
Address: 4820 NE 18th Terrace
Fort Lauderdale, Florida 33308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ronald J. Long
Address: 4820 NE 18th Terrace
Fort Lauderdale, Florida 33308

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

Vicki Powell
Required Signature/Registered Agent

3/14/12
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.

Ronald J. Long
Required Signature/Incorporator

3/14/2012
Date

FILED
12 MAR 19 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA