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Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

ADDED "SHARES OF STOCK"
TO ARTICLE IV PER
TELEPHONE CONVERSATION
WITH ROBERT WEILAND.

K 05/24/12

Office Use Only



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05/23/12--01016--003 **70.00

FILED
12 MAY 23 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 05/24/12

COVER LETTER

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

SUBJECT: XTREME RESTORATIONS, 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: ROBERT WEILAND
Name (Printed or typed)
10 BISHOP CREEK DRIVE
Address
SAFETY HARBOR, FL 34695
City, State & Zip
(727) 243-3763
Daytime Telephone number
WEILAND@TAMPABAY.RR.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: **XTREME RESTORATIONS, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
4730 ULMERTON ROAD
CLEARWATER, FL 33765

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

XTREME RESTORATIONS INC IS AN AUTOMOTIVE RECONDITIONING SERVICE PROVIDER. RECONDITIONING SERVICES INCLUDE REPAIR OF INTERIOR COMPONENTS WHICH INCLUDE DASH BOARD AND DOOR PANEL SURFACES, STEERING WHEEL COVERING, SEAT UPHOLSTERY, CARPETS AND HEADLINERS. RECONDITIONING SERVICES ALSO INCLUDE REPAIR OF EXTERIOR COMPONENTS WHICH INCLUDE WHEEL FACE RESURFACING, PAINT BLEMISH REPAIR, HEAD LIGHT RESURFACING.

ARTICLE IV SHARES

The number of shares of stock is: **2**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **JAMES PHILLIPS, DIRECTOR**

Address: **4233 PERRY PLACE
NEW PORT RICHEY, FL 34652**

Name and Title: **GREG SIEGH, DIRECTOR**

Address: **2201 HIGHLAND WOODS DRIVE
DUNEDIN, FL 34698**

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: **JAMES PHILLIPS**

Address: **4233 PERRY PLACE
NEW PORT RICHEY, FL 34652**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **ROBERT WEILAND**

Address: **10 BISHOP CREEK DRIVE
SAFETY HARBOR, FL 34695**

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.

James Phillips

Required Signature/Registered Agent

5/16/12

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.

Robert J. Weiland

Required Signature/Incorporator

5/20/12

Date

12 MAY 23 PM 3:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA