

P12000 084823

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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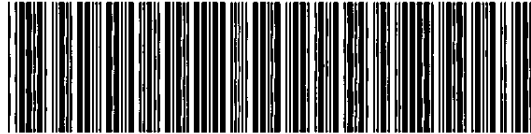
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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12 OCT -8 PM 12:49

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRB  
10/8/12

## COVER LETTER

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

SUBJECT: Figgers Communications 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: Freddie L Figgers  
Name (Printed or typed)

P.O. Box 14987  
Address

Tallahassee FL, 32317  
City, State & Zip

850-545-2402  
Daytime Telephone number

Freddie.Figgers@gmail.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:

Figgers Communications Inc

## ARTICLE II PRINCIPAL OFFICE

Principal street address

413 South 11th Street

Quincy, FL 32351

Mailing address, if different is:

P.O. Box 14987

Tallahassee, Florida 32317

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Telcom Company Wireless Mobile Broadband

## ARTICLE IV SHARES

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

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Freddie L Figgers CEO

Address: P.O. box 14987

Tallahassee, FL 32317

Name and Title: \_\_\_\_\_

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: Freddie Figgers

Address: 413 South 11th Street

Quincy FL 32351

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Freddie Figgers

Address: P.O. Box 14987

Tallahassee FL

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

Freddie L Figgers

Required Signature/Registered Agent

10-08-2012

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.

Freddie L Figgers

Required Signature/Incorporator

10-08-2012

Date