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SECRETARY OF STATE  
TALLAHASSEE, FL 32399

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## COVER LETTER

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

SUBJECT: **FOUNTAIN CUSTOM TRUCKS, 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 R. WILLS, ESQ.**  
Name (Printed or typed)

**P.O. BOX 2356**

Address

**FORT LAUDERDALE, FLORIDA 33303**

City, State & Zip

**954-205-6815**

Daytime Telephone number

**BobWillsFLA@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: FOUNTAIN CUSTOM TRUCKS, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

7530 OAK TERRACE DRIVE

LAKELAND, FLORIDA

33810

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY LAWFULL PURPOSE.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: CLIFF FOUNTAIN, PRESIDENT

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

Address 7530 OAK TERRACE DRIVE

Address: \_\_\_\_\_

LAKELAND, FLORIDA

33810

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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

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

Address \_\_\_\_\_

Address: \_\_\_\_\_

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SECRETARY OF STATE

(conti.)

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: CLIFF FOUNTAIN  
Address: 7530 OAK TERRACE DRIVE  
LAKELAND, FLORIDA 33810

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**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: CLIFF FOUNTAIN  
Address: 7530 OAK TERRACE DRIVE  
LAKELAND, FLORIDA 33810

*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  
1/22/2013  
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  
1/22/2013  
Date