

P13000012447

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(City/State/Zip/Phone #)

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01/11/13--01008--017 **78.75

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13 FEB -6 PM12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W13-2715

π 02/07/13



RECEIVED

2013 FEB -6 PM 4:47

FLORIDA DEPARTMENT OF STATE
Division of Corporations
TALLAHASSEE, FLORIDA

January 14, 2013.

ANTHONY P. FERRARO
P.O. BOX 895
PALM HARBOR, FL 34682

SUBJECT: APF, INC.
Ref. Number: W13000002715

We have received your document for APF, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is S99046 (APF INC.).

Please verify ALL ZIPCODES; there appears to be a discrepancy between the listed Mailing Address and the President's Address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 813A00001009

COVER LETTER

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

SUBJECT: **APF, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: **ANTHONY P. FERRARO**

Name (Printed or typed)

P.O. BOX 895

Address

PALM HARBOR, FL 34682

City, State & Zip

727-259-3276

Daytime Telephone number

tonyn122@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: **APF, INC. APF ONE, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
8426 121st. Street North
Seminole, FL **34682 34772**

Mailing address, if different is:

P.O. Box 895
Palm Harbor, FL **34682 34682**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales of electrical fixtures and supplies.

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anthony P. Ferraro, President

Address: P.O. Box 895

Palm Harbor, FL **33482**

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: Anthony P. Ferraro

Address: **8426 121st. Street North**

Seminole, FL **34682 34772**

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

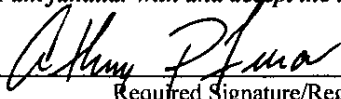
Name: Anthony P. Ferraro

Address: **8426 121st. Street North**

Seminole, FL **34682 34772**

FILED
13 FEB -6 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

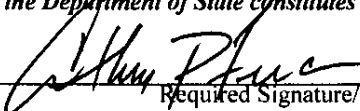
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

1/4/13
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

1/4/13
Date