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(Requestor's Name)

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(City/State/Zip/Phone #)

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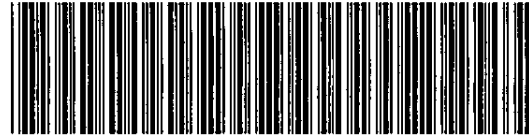
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 29 2013
M. SOLOMON

COVER LETTER

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Tolan and Associates, 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: Wanda Sue Tolan

Name (Printed or typed)

2917 Sunbittern Ct.

Address

Windermeer, FL 34786

City, State & Zip

843-566-4966

Daytime Telephone number

susietolan@yahoo.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: Tolan and Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2917 Sunbittern Ct.

Windermeer, FL 34786

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To primarily be involved in corporate employment searches and to conduct transacations
with other corporations and individuals to achieve such purpose;and to carry on such other
lawful activities which may be necessary to, inconnection with or incidental to the foregoing.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Wanda Sue Tolan, Pres.

Name and Title: _____

Address 2917 Sunbittern Ct.

Address: _____

Windermeer, FL 34786

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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TALLAHASSEE, FLORIDA

(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: Wanda Sue Tolan

Address: 2917 Sunbittern Ct.

Windemeer, FL 34786

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Wanda Sue Tolan

Address: 2917 Sunbittern Ct.

Windermere, FL 34786

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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

Wanda Sue Tolan
Required Signature/Registered Agent

4/24/13
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.

Wanda Sue Tolan
Required Signature/Incorporator

4/24/13
Date