## P1300047217

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SECRETARY OF STATE

MAY 31 2013 M. SOLOMON

## **COVER LETTER**

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

SUBJECT: Coborn Investments of Florida, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

enciosed are an ori	Sinar and one (1) coby or me ar	ncies of incorporation and	I 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

OM	Robert C. Coborn  Name (Printed or typed)  12620 102nd Ave.		
(C)1VI.			
•			
	Address		
	Seminole, FL 33778		
	City, State & Zip		
	320-980-8000		
,	Daytime Telephone number		
	bob.coborn@gmail.com		
	bob.coborn@gmail.com  F-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 NAI The name of the corpora	ME Coborn Investm	ents of Florida, Inc.	
	NCIPAL OFFICE Principal street address	Mailing address, if different is:	
Seminole,FL			
	The state of the s		
ARTICLE III PUR The purpose for which	POSE the corporation is organized is:	eral business puposes.	
			TALLAH/
ARTICLE IV SHA	ARES 10,000	****	29 PM ARY OF
	TIAL OFFICERS AND/OR DIRECT	MORS	2: 25 STATE LORIDA
Name and Title	Robert C. Coborn	Name and Title:	
Address	CEO and Director	Address:	
	12620 102nd Ave.		
	Seminole,FL 33778		
Name and Title	×	Name and Title:	
Address		Address:	
Name and Title	:	Name and Title:	
Address		Address:	
			<del> </del>

Name an	d Title:	Name and Title:	
Address		Address:	<u></u>
	. REGISTERED AGENT lorida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Robert C. Coborn	$\widetilde{A}_{\mathcal{S}}$	<del></del>
Address:	12620 102nd Ave.		₹ ~
	Seminole,FL 33778	TASS	Y 29
ARTICLE VII	INCORPORATOR	Y OF STAFE EE, FLORID/	ED 2:2
The name and ac	Idress of the Incorporator is:	RID	25
Name:	Robert C. Coborn		
Address:	12620 102nd Ave.	_	
	Seminole,FL 33778	<u> </u>	
	ned as registered agent to accept service of proce.  am familiar with and accept the appointment as re  Required Signature/Registered Agent	registered agent and agree to act in this capacity	designated in $4 - 23$
I submit this doc	Required Signature/Registered Agent cument and affirm that the facts stated herein ar		
	Department of State constitutes a third degree felo		
Dobut	Required Signature/Incorporator	5-24 Dat	<u>- 13</u>