

P/300005/292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

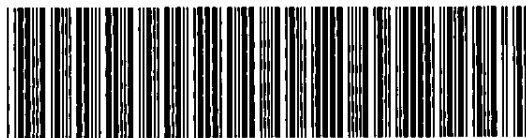
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900247539739

06/13/13--01004--014 **87.50

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATION
2013 JUN 13 PM 11:17
NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
13 JUN 13 AM 11:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TL 06/13/13

COVER LETTER

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

SUBJECT: SPC & Mobile, 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: Larry Parks
Name (Printed or typed)
3945 West Pensacola St
Address
Tallahassee FL 32304
City, State & Zip
850-212-2572
Daytime Telephone number
Cunirepairthat@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: SPC & Mobile, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3945 West Pensacola St
Tallahassee, FL 32304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For Computer repair & the
sell of phones and technology devices

ARTICLE IV SHARES

The number of shares of stock is: 20

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Larry Parks

Name and Title: CEO

Address: 1802 Hurstfield Rd

Address: _____

32303 Tallahassee, FL

Name and Title: Eddie Parks

Name and Title: Director

Address: 1415 West Orange Ave

Address: _____

Tallahassee, FL 32310

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

18 JUN 13 AM 11:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

(cont.)

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: Larry Parks
Address: 1802 Hartsfield Rd
Tallahassee, FL 32303

FILED
13 JUN 13 AM 11:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

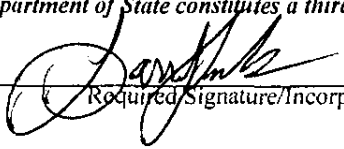
Name: Larry Parks
Address: 1802 Hartsfield Rd
Tallahassee, FL

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


Required Signature/Registered Agent

6/13/13
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

6/13/13
Date