

713000051629

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

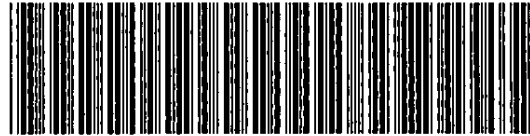
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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13 JUN 13 AM 11:07

CLERK OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

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

**SUBJECT: MICHAEL BETHEA 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: MICHAEL W. BETHEA**

Name (Printed or typed)

**2566 BARRON CT**

Address

**SHALIMAR, FL 32579**

City, State & Zip

**850-259-5974**

Daytime Telephone number

*bethea.michael@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: MICHAEL BETHEA INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2566 BARRON CT

SHALIMAR, FL 32579

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

TO OPERATE A BUSINESS IN THE STATE OF FLORIDA UNDER THE EXISTING LAWS OF THE STATE

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: MICHAEL W BETHEA

Address: PRESIDENT

2566 BARRON CT

SHALIMAR, FL 32579

Name and Title: WILLIE N LEWIS

Address: SEC/TREAS

114 MANNOR WAY, #A

LEWISVILLE, TN 37777

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

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

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

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

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

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

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

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

SEE LAST OF STATE  
FILED IN FLORIDA

13 JUN 13 AM 11:07

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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: MICHAEL W BETHEA  
Address: 2566 BARRON CT  
SHALIMAR, FL 32579

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: VAUGHAN E SLATON  
Address: 6821 W 78TH ST  
TULSA, OK 74131-3222

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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*

Michael W. Bethea

Required Signature/Registered Agent

06/06/2013

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.*

Vaughan E. Slaton

Required Signature/Incorporator

06/06/2013

Date