

P13000052718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

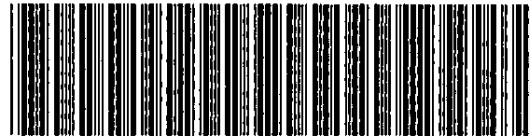
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

691-

W13000029653



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05/20/13--01031--023 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 JUN 14 PM 4:15

6/18/13

COVER LETTER

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

SUBJECT: Top Results Painting 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: Anthony Thomas
Name (Printed or typed)

7095 173rd Place
Address

Live Oak FL 32060
City, State & Zip

386 209-4695
Daytime Telephone number

topresultspainting@icloud.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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DIVISION OF CORPORATIONS
13 JUN 14 PM 4:15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

13 JUN 14 AM 10:23

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

June 5, 2013

ANTHONY THOMAS
7095 173RD PLACE
LIVE OAK, FL 32060

SUBJECT: TOP RESULTS PAINTING INC
Ref. Number: W13000029653

We have received your document for TOP RESULTS PAINTING 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):

You failed to make the correction(s) requested in our previous letter.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 213A00014181

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DIVISION OF CORPORATIONS
13 JUN 14 PM 4:15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

13 JUN -4 AM 11:11

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

May 21, 2013

ANTHONY THOMAS
7095 173RD PLACE
LIVE OAK, FL 32060

SUBJECT: TOP RESULTS PAINTING INC
Ref. Number: W13000029653

We have received your document for TOP RESULTS PAINTING 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 document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 913A00012782

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DIVISION OF CORPORATIONS
13 JUN 14 PM 4:15

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: Top Results Painting Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7095 173rd Place
LIVE OAK FL 32060

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any & all lawful business

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Anthony Thomas Name and Title: _____

Address: 7095 173rd Place Address: _____

LIVE OAK FL 32060

President

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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DIVISION OF CORPORATIONS
13 JUN 14 PM 4:15

(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:

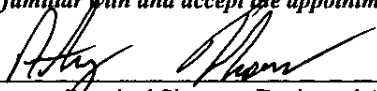
Name: Anthony Thomas
Address: 7095 173rd Place
Live Oak FL 32060

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

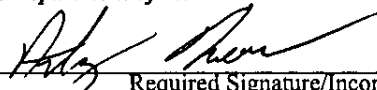
Name: Anthony Thomas
Address: 7095 173rd Place
Live Oak FL 32060

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

05/17/2013
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.


Required Signature/Incorporator

05/17/2013
Date

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