

AUG 12 2013 4:36PM

CAPITAL CONNECTION

NO 103

P 1

Division of Corporations

P130000066254

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H13000179103 3)))



H130001791033ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 222-1222

****Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.**

Email Address: _____

FILED
13 AUG 12 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA PROFIT/NON PROFIT CORPORATION

Surefire Industries Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

13 AUG 12 PM 5:01
DEPT

Electronic Filing Menu

Corporate Filing Menu

Help

MRS
8/13/13

COVER LETTER

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

SUBJECT: Surefire Industries 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: James W Williamson

Name (Printed or typed)

2406 Courtney Meadow Court Unit 303

Address

Tampa Florida 33619

City, State & Zip

813-833-2778

Daytime Telephone number

jameswilliamson201@gmail.com

E-mail address: (to be used for future annual report notification)

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

AUG. 12. 2013 4:36PM

CAPITAL CONNECTION

NO. 5163 P. 3

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
13 AUG 12 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME Surefire Industries Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal ~~street~~ address
2406 Courtney Meadows Court Unit 303
Tampa Florida 33619

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Sales consultation and training.

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James W Williamson President	Name and Title: _____
Address: 2406 Courtney Meadows Court Unit 303	Address: _____
Tampa Florida 33619	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

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:

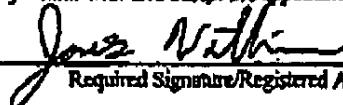
Name: James W Williamson
Address: 2406 Courtney Meadows Court Unit 303
Tampa Florida 33619

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James W Williamson
Address: 2406 Courtney Meadows Court Unit 303
Tampa Florida 33619

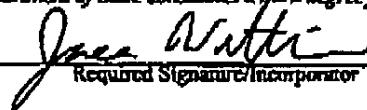
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

8/12/2013

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 §817.155, F.S.


Required Signature/Incorporator

8/12/2013

Date