

PI3000082277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

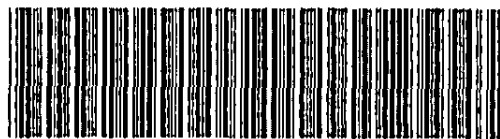
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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10/04/13--01034--007 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 OCT -4 PM 4:19

10/4/13

COVER LETTER

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

SUBJECT: American Portable Toilets 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: Barbara MacWilliam

Name (Printed or typed)

2195 North Kings Highway

Address

Fort Pierce, Florida 34951

City, State & Zip

772-538-9575

Daytime Telephone number

bmacw5@gmail.com

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

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

093013

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
P.O. BOX 6327
TALLAHASSEE, FL 32314

Re: Corporation P00000100071/American Portable Toilets, Inc.

To Whom it May Concern:

I am closing the above corporation Document number P00000100071 named, American Portable Toilets Inc. and I am releasing the name American Portable Toilets Inc. to myself, (Barbara MacWilliam) to open a new corporation. (Please see attached documents). I will not be reinstating the corporation P00000100071.

Kindest Regards



Barbara A. MacWilliam

PER your instructions the following items are attached.
Any problems please call me At 772/538-9575

- 1 Check
- 1 Letter
- 2 Copies Articles (new corp)
- 1 Copy (old corp)

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: American Portable Toilets Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2195 North Kings Highway

Fort Pierce, Florida 34951

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Profit

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Barbara A. MacWilliam-President

Address 2195 North Kings Hwy.
Fort Pierce, Fl 34951

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

FILED
STATE
SECRETARY OF CORPORATIONS
18 OCT -4 PM 4:19

(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:

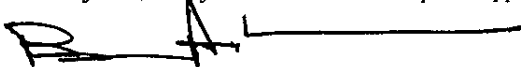
Name: Barbara A. MacWilliam
Address: 2195 North Kings Hwy
Fort Pierce, Fl 34951

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Barbara A. MacWilliam
Address: 2195 North Kings Hwy.
Fort Pierce, Fl 34951

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

9-30-13

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

9-30-13

Date