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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 28 2013
M. SOLOMON

COVER LETTER

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Drivers Threads, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Beleria Floyd
Name (Printed or typed)
11109 N. 20th St.
Address
Tampa, FL 33612
City, State & Zip
813.944.2324
Daytime Telephone number
veritymarketing@verizon.net
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: Drivers Threads, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

11109 N. 20th St.

Tampa, FL 33612

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To sell retail apparel to the Limousine and Taxi industries.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Beleria Floyd - CEO

Name and Title: none

Address 11109 N. 20th St.

Address: _____

Tampa, FL 33612

Name and Title: none

Name and Title: none

Address _____

Address: _____

Name and Title: none

Name and Title: none

Address _____

Address: _____

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TALLAHASSEE, FLORIDA

(conti.)

Name and Title: None Name and Title: None
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Beleria Floyd
Address: 11109 N. 20th St.
Tampa, FL 33612

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Beleria Floyd
Address: 11109 N. 20th St.
Tampa, FL 33612

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

Beleria Floyd 10-23-13
Required Signature/Registered Agent 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.

Beleria Floyd 10-23-13
Required Signature/Incorporator Date