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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 NOV -5 PM 1:25

for 11/6/13

COVER LETTER

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

SUBJECT: ABC Glass & Company, 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: Brian Toennies & Associates
Name (Printed or typed)

9730 E Watson Rd., Suite 100
Address

St. Louis, MO 63126
City, State & Zip

(314) 842-0477
Daytime Telephone number

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

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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: ABC Glass & Company, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5036 Castile Lane

Holiday, FL 34690

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The corporation is formed for the purpose of engaging in Autoglass repair services. The corporation is also formed to engage in any legal activity or transaction which promotes its business purpose.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Randy D. Foran (pres) Name and Title: _____

Address 5036 Castile Lane Address: _____
Holiday, FL 34690

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(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: Randy D. Foran
Address: 5036 Castile Lane
Holiday, FL 34690

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Randy D. Foran
Address: 5036 Castile Lane
Holiday, FL 34690

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

10/31/13
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

10/31/13
Date

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