

P130000091636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

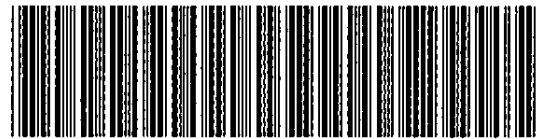
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 NOV -8 PM 3:22
DIVISION OF CORPORATION

13 NOV -8 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

Ps 11/12/13

COVER LETTER

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

SUBJECT: COBURN SALES & SERVICES INTERNATIONAL, 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: Jimmy Coburn

Name (Printed or typed)

5211 NW 102nd PL

Address

Gainesville, FL 32653

City, State & Zip

386-462-4677

Daytime Telephone number

jimmy.coburn@gmail.com

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: COBURN SALES & SERVICES INTERNATIONAL, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5211 NW 102nd PL

Gainesville, FL 32653

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jimmy Coburn, President

Name and Title: _____

Address 5211 NW 102nd PI
Gainesville, FL 32653

Address: _____

Name and Title: Giuliana Coburn, Secretary

Name and Title: _____

Address 5211 NW 102nd PI
Gainesville, FL 32653

Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

SECTION OF STATE
TALLAHASSEE FLORIDA

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AND
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(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: Jimmy Coburn

Address: 5211 NW 102nd Pl
Gainesville, FL 32653

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Giuliana Coburn

Address: 5211 NW 102nd Pl
Gainesville, FL 32653

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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

11/08/2013

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

11/08/2013

Date