

P130000091813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

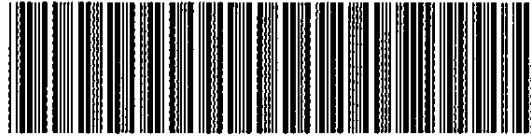
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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13 NOV 12 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: _____



Swartz Construction, 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: _____

Swartz Construction

Name (Printed or typed)

8180 Winnie Lane

Address

Tallahassee FL 32304

City, State & Zip

850-345-1441

Daytime Telephone number

ARON SWARTZ I @ YAHOO.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:

Swartz Construction, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

8180 Winnick Lane
Tallahassee FL 32301

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

provide labor

ARTICLE IV SHARES

The number of shares of stock is:

10

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Aaron Swartz, P

Name and Title:

10

Address

8180 Winnick Lane
Tallahassee FL
32301

Address:

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: ~~Benjamin Ben Swartz~~ Aaron Swartz
Address: 8180 Winnie Lane
Tallahassee FL 32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Aaron Swartz
Address: 8180 Winnie Lane
Tallahassee FL 32304

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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

Aaron Swartz
Required Signature/Registered Agent

11-12-13
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.

Aaron Swartz
Required Signature/Incorporator

11-12-13
Date