

P13000093945

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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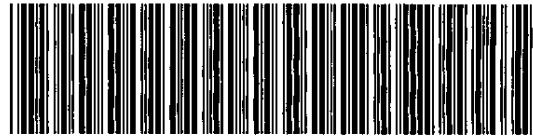
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
13 NOV 18 PM 3:01

11/19/13

COVER LETTER

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

SUBJECT: Critical Care Home Maintenance and Repair, 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: Fred Beyer
Name (Printed or typed)

411 Mayfair Drive
Address

Venice, Florida 34293
City, State & Zip

941-497-4057
Daytime Telephone number

FBeyer@Prodigy.Net
E-mail address: (to be used for future annual report notification)

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

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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: Critical Care Home Maintenance and Repair, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3130 Atwater Drive
North Port, Florida 34288

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: For Profit

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Larry Gloster Pres

Name and Title: Theresa Gloster V.P.

Address 3130 Atwater Drive
North Port, Fl.
34288

Address: 3130 Atwater Drive
North Port, Fl.
34288

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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18 NOV 18 PM 3:02

(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: Fred Beyer
Address: 411 Mayfair Drive
Venice, Fl. 34293

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Name: Fred Beyer
Address: 411 Mayfair Drive
Venice, Fl. 34293

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

 11-12-13
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.

 11-12-13
Required Signature/Incorporator Date

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