

P140000006745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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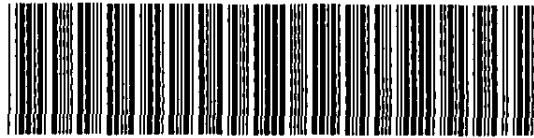
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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1/24/14

COVER LETTER

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

SUBJECT: Clyde Nickyson Heating & Air Condition, 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: Clyde Nickyson
Name (Printed or typed)

271 Bermuda Road
Address

Tallahassee, Florida 32312
City, State & Zip

(850) 588-6775
Daytime Telephone number

NA
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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CORPORATIONS
TALLAHASSEE, FLORIDA

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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: Clyde Nickyson's Heating + Air Condition, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

271 Bermuda Rd.

Tallahassee FL, 32312

Mailing address, if different is:

271 Bermuda Road
Tallahassee, Florida
32312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Air Condition and Heating

ARTICLE IV SHARES

The number of shares of stock is: 2

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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Clyde Nickyson (P) Name and Title: NA

Address: 271 Bermuda Rd. Address: _____
Tallahassee FL, 32312

Name and Title: NA Name and Title: NA

Address: _____ Address: _____

Name and Title: NA Name and Title: NA

Address: _____ Address: _____

(cont.)

Name and Title: NA Name and Title: NA
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Clyde Nickyson
Address: 271 Bermuda Rd.
Tallahassee FL 32312

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Clyde Nickyson
Address: 271 Bermuda Road
Tallahassee FL 32312

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

Clyde Nickyson
Required Signature/Registered Agent

1-24-14
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.

Clyde Nickyson
Required Signature/Incorporator

January 24, 2014
Date