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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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COVER LETTER

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

SUBJECT: Impact USA 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: William P. Abendschein

Name (Printed or typed)

1128 Tapestry Drive

Address

Celebration FL 34747

City, State & Zip

717.451.6584

Daytime Telephone number

wpa@impactusa.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: Impact USA Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address

1128 Tapestry Drive
Celebration FL 34747

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: any and all lawful business.

ARTICLE IV SHARES 1000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William Abendschein, President

Address: 1128 Tapestry Drive
Celebration FL 34747

Name and Title: _____

Address: _____

Name and Title: Roberta Abendschein, Treasurer

Address: 1128 Tapestry Drive
Celebration FL 34747

Name and Title: _____

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: William Abendschein

Address: 1128 Tapestry Drive

Celebration FL 34747

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Name: William Abendschein

Address: 1128 Tapestry Drive

Celebration FL 34747

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

1/20/2014

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

1/20/2014

Date

STATE
OF
FLORIDA
DEPARTMENT OF
STATE

14 JAN 22 AM 11:09

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