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TALLAHASSEE FLORIDA

## COVER LETTER

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

SUBJECT: **S&S Electric of Florida 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: **S&S Electric**

Name (Printed or typed)

**2990 Hwy 71 North**

Address

**Marianna, FL 32446**

City, State & Zip

**850-526-3771**

Daytime Telephone number

**tashanicholson88@embarqmail.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: S&S Electric of Florida Inc

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

2990 Hwy 71 North

Marianna Fl 32446

**ARTICLE III PURPOSE**

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

**ARTICLE IV SHARES** 4

The number of shares of stock is: \_\_\_\_\_

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Ricky Spears Pres

Address: 4494 Pilcher Rd  
Marianna Fl 32448

Name and Title: Tasha Nicholson VP

Address: 4485 Cook Rd  
Marianna Fl 32448

Name and Title: Marshall Nicholson Tres

Address: 4485 Cook Rd  
Marianna Fl 32448

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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TALLAHASSEE FLORIDA

(cont.)

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: Mitzi Spears  
Address: 4494 Pilcher Rd  
Marianna Fl 32448

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: Anna Troxell  
Address: 5818 Pine tree Ave Apt A  
Panama City Bch Fl 32408

*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*

Mitzi Spears  
Required Signature/Registered Agent

2-19-14  
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.*

Anna Troxell  
Required Signature/Incorporator

2-19-2014  
Date



Tasha L. Nicholson

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