

P14000026286

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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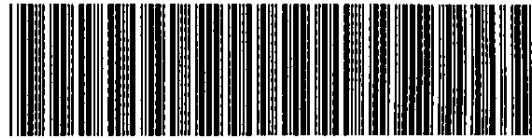
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
14 MAR 24 PM 1:09

3/25/14

COVER LETTER

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

SUBJECT: TRIPLE F ENTERPRISES, 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: Richard P. Ferry

Name (Printed or typed)

1812 County Road 308

Address

Crescent City, FL 32112

City, State & Zip

305-283-3955

Daytime Telephone number

smokeater56@hotmail.com

E-mail address: (to be used for future annual report notification)

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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)

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ARTICLE I NAME

The name of the corporation shall be: TRIPLE F ENTERPRISES, INC.

ARTICLE II' PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1812 County Road 308
Crescent City, FL 32112

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any activity or business permitted
under the laws of the United States and/or the State of
Florida

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Richard Paul Ferry, P, T, S

Name and Title: _____

Address 1812 County Road 308

Address: _____

Crescent City, FL 32112

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(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: Richard Paul Ferry
Address: 1812 County Road 308
Crescent City, FL 32112

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John W. Parente
Address: P.O. Box 606
Crescent City, FL 32112

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

Richard P. Ferry
Required Signature/Registered Agent

March 19, 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.

John W. Parente
Required Signature/Incorporator

March 19, 2014
Date

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