

P14000032911

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

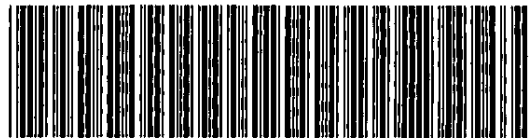
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/11/14--01004--021 **70.00

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14 APR 11 PM 4:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

g 4/14/14

COVER LETTER

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

SUBJECT: Perc Data Connections 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: Timothy Jungers

Name (Printed or typed)

67 Marnel Road

Address

Montgomery IL 60538

City, State & Zip

630-779-2906

Daytime Telephone number

HPM150P@comcast.net

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

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TALLAHASSEE, FLORIDA

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: Perc Data Connections Inc

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ARTICLE II PRINCIPAL OFFICE

Principal street address

67 Marnel Road
Montgomery, IL 60538

Mailing address: SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: any lawful business activity

ARTICLE IV SHARES 1000

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Timothy Jungers, President

Address: 67 Marnel Road
Montgomery IL 60538

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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: REGISTERED AGENTS INC.
Address: 3030 N. Rocky Point Dr, STE 150A
Tampa, FL 33607

ARTICLE VII INCORPORATOR

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

Name: Roger DuMez
Address: 6314 N. Knox Ave
Chicago IL 60646

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



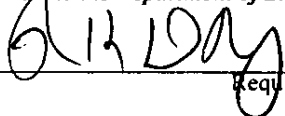
Dan Keen -President

4/8/14

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.



Required Signature/Incorporator

4/8/14

Date

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TALLAHASSEE, FLORIDA