

om:

07/16/2014 11:41

#518 P.001/003

Division of Corporations

Page 1 of 1

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H14000169484 3)))



H140001694843ABC4

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.  
Account Number : 075350000353  
Phone : (800) 221-2972  
Fax Number : (888) 692-9256

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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

FLORIDA PROFIT/NON PROFIT CORPORATION  
SEAN PATRICK FEELEY INC

|                       |         |
|-----------------------|---------|
| Certificate of Status | 0       |
| Certified Copy        | 0       |
| Page Count            | 03      |
| Estimated Charge      | \$70.00 |

B 7/17/14

Electronic Filing Menu

Corporate Filing Menu

Help

From:

07/16/2014 11:41

#518 P.002/003

**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: SEAN PATRICK FEELEY INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

6112 KESTRAL PARK DR

LITHIA, FL 33547

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: ANY LAWFUL PURPOSE

**ARTICLE IV SHARES**

The number of shares of stock is: 200 No Par Value

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

Name and Title: SEAN PATRICK FEELEY (DIR)

Address: 6112 KESTRAL PARK DR  
LITHIA, FL 33547

Name and Title: SEAN PATRICK FEELEY (PRES)

Address: 6112 KESTRAL PARK DR  
LITHIA, FL 33547

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

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

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

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

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

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

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

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

14 JUL 16 PM 12:23

SEAN PATRICK FEELEY  
DIVISION OF CORPORATE FILINGS

From:

07/16/2014 11:41

#518 P.003/003

(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: SEAN PATRICK FEELEY  
Address: 6112 KESTRAL PARK DR  
LITHIA, FL 33547

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: SEAN PATRICK FEELEY  
Address: 6112 KESTRAL PARK DR  
LITHIA, FL 33547

*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*

Sean P. Feeley  
Required Signature/Registered Agent

07/15/2014

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.*

Sean P. Feeley  
Required Signature/Incorporator

07/15/2014

Date

14 JUL 16 PM 12:23  
RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA