

P14000006266S

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

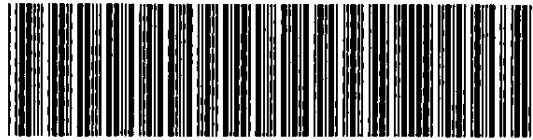
(Document Number)

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B- 7/25/14



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COVER LETTER

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

SUBJECT: ABT Services 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Gary S Shepard

Name (Printed or typed)

14584 Apache Ave

Address

Largo, FL 33774

City, State & Zip

727-595-4349

Daytime Telephone number

ABTServices@tampabay.rr.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: ABT Services of Florida, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

14584 Apache Ave

Largo, FL 33774

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide accurate and timely Accounting,
General Business, and complete Tax Services to those in need of such services.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gary S Shepard, President/Director

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF THE
SUPREME COURT
JUL 21 2019

(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: InCorp Services, Inc.
Address: 17888 67th Court North
Loxahatchee, FL 33470

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gary S. Shepard
Address: 14584 Apache Ave.
Largo, FL 33774

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

Heather Nee for InCorp Services, Inc. 07/14/14
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.

G. Shepard 07/18/2014
Required Signature/Incorporator Date