

P14000063880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

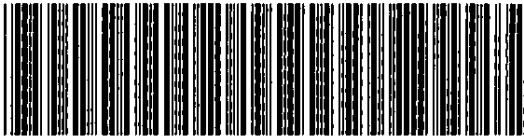
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W14-44642

Office Use Only



800262394518

07/18/14--01017--010 \*\*87.50

APPROVAL  
AND  
FILED  
14 JUL 29 PM 4:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/14

## COVER LETTER

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

SUBJECT: Nastar Roofing 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  
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: Ben Adkison  
Name (Printed or typed)  
4005 Del Prado Blvd  
Address  
Cape Coral, FL33904  
City, State & Zip  
239.567.7223  
Daytime Telephone number  
Chris@nastarroofing.com  
E-mail address: (to be used for future annual report notification)

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 21, 2014

BEN ADKISON  
4005 DEL PRADO BLVD  
CAPE CORAL, FL 33904

SUBJECT: NASTAR ROOFING OF FLORIDA  
Ref. Number: W14000044642

We have received your document for NASTAR ROOFING OF FLORIDA and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 014A00015611

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: Nastar Roofing Services of Florida INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

4005 Del Prado Blvd.

Cape Coral, Florida 33904

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Professional Corporation

**ARTICLE IV SHARES 1**

The number of shares of stock is: 1

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

Name and Title: Ben Adkison President

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

Address 4005 Del Prado Blvd.

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

Cape Coral, Fl 33904

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

14 JUL 29 PM 4:52  
SECRETARY OF STATE  
FLORIDA

APPROVED  
AND  
FILED

APPROVAL  
AND  
FILED (cont.)

Name and Title: _____	Name and Title: <u>14 JUL 29 PM 4:52</u>
Address _____	Address: <u>SECRETARY OF STATE</u>
_____	<u>TALLAHASSEE, FLORIDA</u>
_____	_____

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

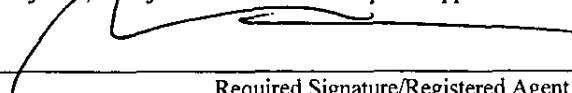
Name: Chris Simonetti  
Address: 1123 SE 1st Ter  
Cape Coral, FL 33990

**ARTICLE VII INCORPORATOR**

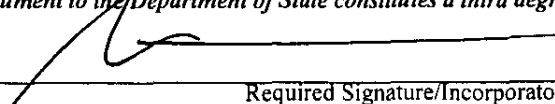
The name and address of the Incorporator is:

Name: Chris Simonetti  
Address: 1123 SE 1st Ter  
Cape Coral, FL 33990

*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*

 _____ Required Signature/Registered Agent	<u>7/24/14</u> _____ 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	<u>7/24/14</u> _____ Date
---	---------------------------------