

PAID 000071250

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

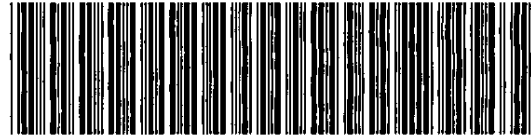
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/21/14--01016--001 **78.75

14 AUG 21 AM 7:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Undercover Restorations 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

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Tim Ford

Name (Printed or typed)

550 N. Banana River Dr.

Address

Merritt Island, Florida, 32952

City, State & Zip

1-321-960-0716

Daytime Telephone number

Ttimfrd@yahoo.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: Undercover Restorations Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

550 N. Banana River Dr.

Merritt Island FL, 32952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Restoration of classic automobiles.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Tim Ford (Owner)

Name and Title: _____

Address 550 N. Banana River Dr.

Address: _____

Merritt Island FL, 32952

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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SECRET
TREASURY

(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: Tim Ford

Address: 550 N. Banana River Dr.

Merritt Island Fl, 32952

ARTICLE VII INCORPORATOR

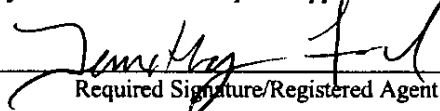
The **name and address** of the Incorporator is:

Name: Tim Ford

Address: 550 N. Banana River Dr.

Merritt Island Fl, 32952

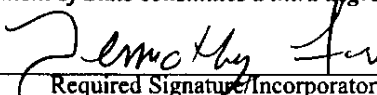
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

08/18/2014

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.


Required Signature/Incorporator

08/18/2014

Date

16 AUG 21 AM 7:52
STATE
TALLAHASSEE FL 32399A