

P 14 000074538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

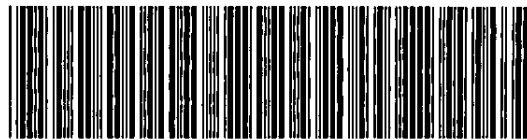
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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09/05/14--01015--002 **70.00

FILED

14 SEP -5 PM 12:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

9/9/14

COVER LETTER

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

SUBJECT: **Stephen T. Olson, 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: **Stephen T. Olson**

Name (Printed or typed)

2100 N. Florida Mango Road

Address

West Palm Beach, FL 33409

City, State & Zip

(561) 459-9276

Daytime Telephone number

steve@waterwaycap.com

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14 SEP -5 PM 12:03

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be:

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~~14 SEP -5 PM 12: 03~~

Principal street address

Mailing address, if different is: **SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

The purpose for which the corporation is organized is:

To perform all legal business activity.

The number of shares of stock is:

100

Name and Title: **Stephen T. Olson, President**

Name and Title: _____

Address 2100 N. Florida Mango Road

Address:

West Palm Beach, FL 33409

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ 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: Stephen T. Olson

Address: 2100 N. Florida Mango Road

West Palm Beach, FL 33409

ARTICLE VII INCORPORATOR

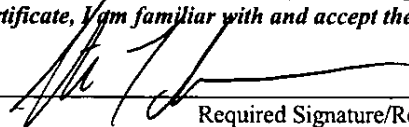
The **name and address** of the Incorporator is:

Name: Stephen T. Olson

Address: 2100 N. Florida Mango Road

West Palm Beach, FL 33409

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

9/2/14

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

9/2/14

Date

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14 SEP - 5 PM 12:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA