

P140000 85621

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

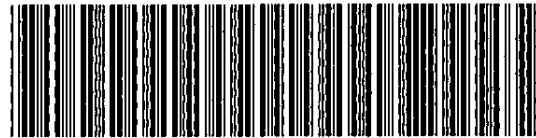
(Document Number)

Certified Copies ✓

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10/21/14--01001--014 **128.75

RECEIVED
DIVISION OF CORPORATION

14 OCT 20 PM 2:54

RECEIVED

RECEIVED
TALLAHASSEE, FLORIDA

14 OCT 20 PM 3:08

APPROVED
AND
FILED

OCT 20 2014

S. GILBERT

COVER LETTER

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

SUBJECT: Platinum Services of Tallahassee 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: Chris Mathis
Name (Printed or typed)

1325 Stone Rd. 502
Address

Tlk. Fl. 32303
City, State & Zip

(850) 210-4377
Daytime Telephone number

P.Services1@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)

ARTICLES
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: Platinum Services of Tallahassee Inc. 08

ARTICLE II PRINCIPAL OFFICE

Principal street address

1325 Stone Rd. 502
Tallahassee Fl. 32303

Mailing address, if different is: STATE
TALLAHASSEE FLORIDA

1700 N. Monroe St. Suite 11-130
Tallahassee Fl. 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Wholesale and Retail sale
of cleaning supplies for Auto & Residential.
Automobile Detailing for Fleets

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Chris Mathis (President) Name and Title: _____

Address 1325 Stone Rd 502 Address: _____
Tallahassee Fl. 32303 _____

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: Chris Mathis

Address: 1325 Stone Rd 502

Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Chris Mathis

Address: 1325 Stone Rd 502

Tallahassee, FL 32303

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

Chris Mathis
Required Signature/Registered Agent

10/20/14
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.

Chris Mathis
Required Signature/Incorporator

10/20/14
Date