

P14000087771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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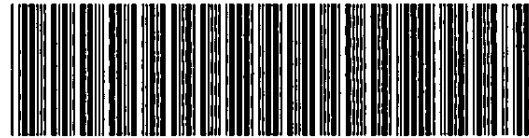
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/27/14--01049--005 **87.50

14 OCT 27 PM 3:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

1/4

COVER LETTER

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

SUBJECT: The Highways Clothing 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: Zachary Ray

Name (Printed or typed)

136 Citrus Park Cir

Address

Boynton Beach FL 33436

City, State & Zip

7869851381

Daytime Telephone number

kleanmusik@gmail.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)

APPROVED
AND
FILED

ARTICLE I NAME The Highways Clothing Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address

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Mailing address, if different is: _____

136 Citrus Park Cir

Boynton Beach FL 33436

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE Clothing and apparel under the HWYS or The Highway
The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES 100 (Zachary Ray)
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Zachary Ray (President)

Address: 136 citrus park cir

Boynton Beach FL 33436

Name and Title: Josh Torv (Vice President)

Address: 215 sw 9st

Hallandale Beach FL 33009

Name and Title: Nathan Butts (Treasurer)

Address: 9847 Kamena Cir

Boynton Beach, FL 33436

Name and Title: David Suazo (Secretary)

Address: 5599 Cynwd Cir

Lake Worth, FL 33463

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

APPROVED
AND
FILED

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Zachary Ray
Address: 136 citrus park cir
Boynton Beach, FL 33436

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Zachary Ray
Address: 136 citrus park cir
boynton beach, fl 33436

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

10/24/14

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

10/24/14

Date