

PA000100533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

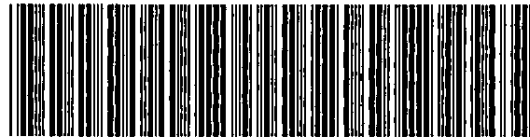
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000267310750

12/16/14--01018--007 **78.75

14 DEC 16 AM 8:51
PA000100533

COVER LETTER

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

SUBJECT: PEAK ATHLETIC POSTERMAN SYSTEM, 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: PAUL A. GAUL
Name (Printed or typed)

1721 VILLAGE BOULEVARD #105
Address

WEST PALM BEACH FL 33409
City, State & Zip

305-766-2255
Daytime Telephone number

PANTHONY6@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)

ARTICLE I NAME

The name of the corporation shall be:

PEAK ATHLETIC POSTEROL SYSTEM, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

910 GAYLE 1724 VILLAGE BOULEVARD #105
WEST PALM BEACH FL 33409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PERSONAL FITNESS TRAINING
AND RELATED ACTIVITIES

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

PAUL A GAYLE

Name and Title:

PRESIDENT

Address

1724 VILLAGE BOULEVARD

Address:

UNIT 105

WEST PALM BEACH FL 33409

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

14 DEC 6 AM 8:51

(cont.)

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: PAUL A GAYLE
Address: 1724 VILLAGE BOULEVARD #105
WEST PALM BEACH FL 33409

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PAUL A GAYLE
Address: 1724 VILLAGE BOULEVARD #105
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

[Signature]
Required Signature/Registered Agent

12/12/14
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.

[Signature]
Required Signature/Incorporator

12/12/14
Date

14 DEC 16 AM 8:51
[Stamp]