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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

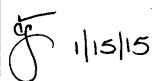


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SECRETARY OF STATE
SECRET



COVER LETTER

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

SUBJECT: Sai	ndra S Williams I	NC ate name – <u>must incl</u>	ÜDE SUFFIX)	
Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED	
FROM:	Sandra S Williams	6		
	Nam	e (Printed or typed)	· · · · · · · · · · · · · · · · · · ·	
1	7911 Leetana Ro	oad		
_		Address		1.
N	lorth Fort Myers,	FL 33917	AAA SA	<u> </u>
2	City, 39-567-063 6	State & Zip	RY OF ST	. C
	Daytime 7	Celephone number		•

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

Sanwms@comcast.net

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

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: Sandra S W	filliams Inc FILED
ARTICLE II PRINCIPAL OFFICE Principal street address	Mailing address, if different is: 0
17911 Leetana Road	SECRETARY OF STATE ALLAHASSEE, FLORIDA
North Fort Myers, FL 33917	
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	Y AND ALL LAWFUL BUSINESS
ARTICLE IV SHARES 400	
ARTICLE IV SHARES The number of shares of stock is: 100	.
ARTICLE V INITIAL OFFICERS AND/OR DIRE	
Name and Title: Sandra S Williams, Presid	ent Name and Title:
Address 17911 Leetana Ro	
N Ft Myers FL 33	917
	
Name and Title: Sandra S Williams, Secreta	Name and Title:
Address 17911 Leetana Ro	oad Address:
N Ft Myers FL 33	917
Name and Title: Sandra S Williams, Treasu	rer Name and Title:
Address 17911 Leetana Ro	
N Ft Myers FL 33	

Name and	Title: Name and Title:
Address	Address:
ARTICLE VI	REGISTERED AGENT rida street address (P.O. Box NOT acceptable) of the registered agent is:
Name:	Sandra S Williams Michael S. Hagen 17911 Leetana Road 6249 Presidential Ct Stef N-Ft-Myers FL 33917 For V Myen F2 33919
Address:	17911 Leetana Road 6249 Presidential Ct Stef
	N-Ft-Myers FL 33917 For Myen F2 33919
ARTICLE VII	INCORPORATOR
The <u>name and ado</u>	Iress of the Incorporator is:
Name:	Sandra S Williams
· Address:	17911 Leetana Road
	N Ft Myers FL 33917
	ed as registered agent to accept service of process for the above stated corporation at the place designated in manufacture familiar with and accept the appointment as registered agent and agree to act in this capacity
111	WOOD 1-6-2015
	Required Signature/Registered Agent Date
	ment and affirm that the facts stated herein are true. I am aware that the false information submitted in a epartment of State constitutes a third degree felony as provided for in s.817.155, F.S.
Dana	Required Signature/Incorporator 1/6/2015
-	Required Signature/Incorporator Date

FILED

15 JAN 12 AN 9: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA