## P15000003607

(Requestor's Name)				
(Address)				
(Address)				
(Ci	ty/State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL.		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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01/12/15--01030--004 \*\*78.75



1-15-15

## **COVER LETTER**

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

SUBJECT: SUE	BATOMICFACTO	DRY INC	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation un	d a check for:
\$70.00 Filling Fee	■ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: S	COTT AIKENS	e (Printed or typed)	
16	3102 3rd STREE	T EAST	
	,	Address	
R	EDINGTON BEA	•	8
	•	State & Zip	
21	5.915.0610		
-	·	elephone number	
<u>sc</u>	COTT@ORBITALN	OISE.COM d for future annual report	notification
	E-mail address: (to be use	a for future annual report	nouncation)

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 NAM The name of the corporat	E SUBATOMICFAC on shall be:	TORY INC		-	
ARTICLE II PRII	<b>VCIPAL OFFICE</b> Principal <u>street</u> address		address, if different is:		
	BEACH, FL 33808				-
					_
The purpose for which the	POSE ne corporation is organized is:  THE PU	IRPOSE FOR	WHICH THIS		-
	ON IS ORGANIZED IS FO G ANY OR ALL LAWFUL E			ONS	3
ARTICLE IV SHA	RES 100		Mess	15	<del></del>
	IAL OFFICERS AND/OR DIRECTORS	<u>S</u>	CRE FARY LAHAS SEE	JAN 12	COMMITTEE OF THE PARTY OF THE P
	SCOTT AIKENS 16102 3rd STREET EAST	Name and Title:	FIST	. <u></u>	_ क्र
Address	REDINGTON BEACH, FL 33808	Address:	ATE	ਨੂੰ ਹ	_ <del>124</del>
Name and Title:		Name and Title:			_
Address					-
			***************************************		-
					-
Address		Address:			<del>-</del> -

· Name and	l Title:	Name and Title:
Address		Address:
ARTICLE VI	REGISTERED AGENT	
The name and Flo	orida street address (P.O. Box NOT acceptable) of SCOTT AIKENS	the registered agent is:
Address:	16102 3rd STREET EAST	
	REDINGTON BEACH, FL 33808	
ARTICLE VII	INCORPORATOR	
The name and ad	dress of the Incorporator is:	
Name:	SCOTT AIKENS	
Address:	16102 3rd STREET EAST	
	REDINGTON BEACH, FL 33808	
Having been nan this certificate, I d	ned as registered agent to accept service of process im familiar with and accept the appointment as reg	for the above stated corporation at the place designated is istered agent and agree to act in this capacity
•		01/01/2015
	Required Signature Registered Agent	Date
I submit this document to the L	ument and affirm that the facts stated herein are to Department of State constitutes a third degree felony	true. I am aware that the false information submitted in a y as provided for in s.817.155, F.S.
.<		01/01/2015
	Required Signature/Incorporator	Date