

P15000016457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

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15 FEB 18 AM 7:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FEB 19 2015

S. GILBERT

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

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

| | |
|----------------------------------|---------------------------------------|
| <input type="checkbox"/> \$70.00 | <input type="checkbox"/> \$78.75 |
| Filing Fee | Filing Fee & Certificate of Status |

ADDITIONAL COPY REQUIRED

FROM: Gerald Thompson
Name (Printed or typed)

Address

City, State & Zip

Daytime Telephone number

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: Thompson AC & Appliance Repair Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1790 Lakeview Village Dr

Brandon, FL 33510

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Conduct maintenance and repair work on
air conditioning equipment and appliances.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gerald Thompson, President

Address: 1790 Lakeview Village Dr.
Brandon, FL 33510

Name and Title: Shaundra Brown, V.P.

Address: 1790 Lakeview Village Dr.
Brandon, FL 33510

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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TALLAHASSEE, FLORIDA

(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: Shaundra Brown

Address: 1790 Lakeview Village Dr

Brandon, FL 33510

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Shaundra Brown

Address: 1790 Lakeview Village Dr

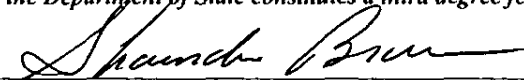
Brandon, FL 33510

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

2/12/15
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

2/12/15
Date