

P/5000018438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

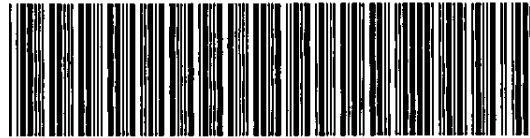
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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02/23/15--01011--011 **70.00

STATE
OFFICE OF
FLORIDA

15 FEB 23 PM 3:29

MD 2/25

COVER LETTER

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

SUBJECT: Sweetwater Consulting Company

(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: Stephen Pate

Name (Printed or typed)

2327 E Main St

Address

Lakeland, FL 33801

City, State & Zip

(941) 822-6157

Daytime Telephone number

Stephen@sweetwaterconsulting.co

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: Sweetwater Consulting Company

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2327 E Main St

Lakeland, FL 33801

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to provide insurance, tax preparation and consulting services to the public.

5 FEB 23 PM 3:29
STATE OF FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President Stephen Pate

Name and Title: Treasurer Stephen Pate

Address: ~~2327~~ 2327 E Main St
Lakeland, FL 33801

Address: 2327 E Main St
Lakeland FL 33801

Name and Title: Secretary Stephen Pate

Name and Title: _____

Address: 2327 E Main St
Lakeland FL 33801

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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: Stephen Pate
 Address: 2327 E Main St
Lakeland, FL 33801

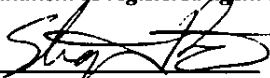
15 FEB 23 PM 3:29
 STATE OF FLORIDA
 DEPARTMENT OF STATE

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Name: Stephen Pate
 Address: 2327 E Main St
Lakeland, FL

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

Stephen Pate  01/07/2015
 Required Signature/Registered Agent 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.

Stephen Pate  01/07/2015
 Required Signature/Incorporator Date