

P15000031159

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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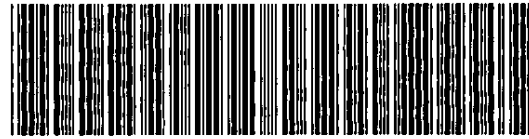
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

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

Attn: Mel Solomon
From: John Koepke
239-314-4303

SUBJECT: _____
(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:

John Koepke

Name (Printed or typed)

Address

City, State & Zip

Daytime Telephone number

sales@toolinghouse.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: 3D Printing and Machine, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1136 NE Pine Island Rd.
Unit 62
Cape Coral, FL 33909

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: 3D printing, prototypes and
small machining projects including secondary work.

ARTICLE IV SHARES

The number of shares of stock is: 600

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John W. Koepke, owner

Name and Title: _____

Address: 1407 SE 21st St.

Address: _____

Cape Coral, FL 33990

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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(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: John W. Koepke
Address: 1407 SE 21st Street
Cape Coral, FL 33990

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John W. Koepke
Address: 1407 SE 21st Street
Cape Coral, FL 33990

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

John W. Koepke 3-17-15
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.

John W. Koepke 3-17-15
Required Signature/Incorporator Date

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TALLAHASSEE, FLORIDA

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