

DIS000043406

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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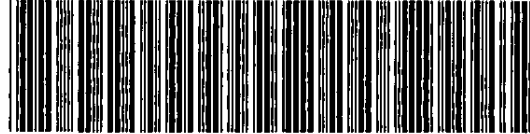
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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05/11/15--01012--003 \*\*/8.75

STANDARD  
FILING  
TALL

15 MAY 11 PM 1:12

## COVER LETTER

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

SUBJECT: Pyrat Enterprises, Inc.  
(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: Joan H. Wilcox  
Name (Printed or typed)

4337 El Mar Drive  
Address

Ft. Lauderdale, FL 33308  
City, State & Zip

754-422-2448  
Daytime Telephone number

johnhwilcox@yahoo.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:

Pyrat Enterprises, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

4337 El Mar Drive

Ft. Lauderdale, FL

33308

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To sell bottled hot sauce.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: JOHN WILCOX, CEO

Name and Title: \_\_\_\_\_

Address

4337 El Mar Dr #106

Address: \_\_\_\_\_

Ft. Lauderdale

FL 33308

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address

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:

JOHN H. WILCOX

Address:

4337 El Mar Dr., #106

Ft. Lauderdale, FL 33308

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name:

JOHN H. WILCOX

Address:

4337 El Mar Dr., #106

Ft. Lauderdale, FL 33308

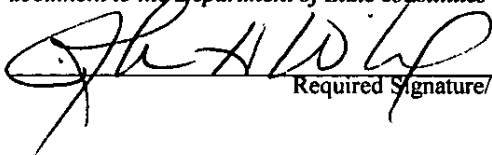
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Required Signature/Registered Agent

4/14/15  
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

4/14/15  
Date

15 MAY 11 PM 1:12  
TALLAHASSEE, FLORIDA