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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY 11 AM 11:29

APPROVED
AND
FILED

A handwritten signature in black ink, appearing to be 'VH' or similar initials.

COVER LETTER

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

SUBJECT: Value Ground Support Solutions, 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: Steven W Hartz

Name (Printed or typed)

1456 NE Ocean Blvd. 7-202

Address

Stuart FL 34996

City, State & Zip

574-514-1929

Daytime Telephone number

steve@valuctooleng.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

APPROVED
AND
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ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

15 MAY 11 AM 11:29

ARTICLE I NAME

The name of the corporation shall be: Value Ground Support Solutions, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address
1456 NE Ocean Blvd 7-202

Mailing address, if different is:

Stuart, FL 34996

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide Equipment, Tools, Repair and Calibration, of Equipment and services to companies involved in building, testing and repair of aircraft.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Steven W Hartz, President Name and Title: _____

Address 1456 NE Ocean Blvd. 7-202 Address: _____

Stuart, FL 34996 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

APPROVAL
AND
FILED

15 MAY 11 AM 11:29

Name and Title: _____ Name and Title: SECRETARY OF STATE
Address: _____ TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:

Name: Steven W Hartz
Address: 1456 NE Ocean Blvd. 7-202
Stuart, FL 34996

ARTICLE VII INCORPORATOR

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

Name: Steven W Hartz
Address: 1456 NE Ocean Blvd. 7-202
Stuart, FL 34996

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 6/1/2015. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 5/5/2015
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 5/5/2015
Date