

PI5000053162

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

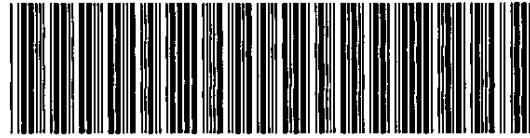
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

WIS-38840

**COVER LETTER**

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

Quick Reaction Force d/b/a QRF

**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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                            & Certificate of  
                            Status  
**ADDITIONAL COPY REQUIRED**

FROM: Christian S. Hofmann  
\_\_\_\_\_  
Name (Printed or typed)  
  
336 Burns Rd.  
\_\_\_\_\_  
Address  
  
Montoursville, PA 17754  
\_\_\_\_\_  
City, State & Zip  
  
570-435-0827  
\_\_\_\_\_  
Daytime Telephone number  
  
christian.s.hofmann@gmail.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

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



RECEIVED

15 JUN 15 PM 4:44

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

June 2, 2015

CHRISTIAN S. HOFFMAN  
336 BURNS RD  
MONTTOURSVILLE, PA 17754

SUBJECT: QUICK REACTION FORCE D/B/A QRF  
Ref. Number: W15000038540

We have received your document for QUICK REACTION FORCE D/B/A QRF and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Entities may file using only the entity's name. Please delete any reference to the "doing business as name" in your document. If you wish to register your fictitious name, you may do so by filing an application and submitting the appropriate fees to this office.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason  
Regulatory Specialist II

Letter Number: 615A00011532

## COVER LETTER

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New Filing Section  
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Tallahassee, FL 32314

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& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status  
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Daytime Telephone number  
  
christian.s.hofmann@gmail.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**Quick Reaction Force Inc  
The name of the corporation shall be: \_\_\_\_\_**ARTICLE II PRINCIPAL OFFICE**Principal ~~street~~ address  
501 Ensenada Drive  
Orlando, FL 32825Mailing address, if different is:  
336 Burns Road  
Montoursville, PA 17754**ARTICLE III PURPOSE**to provide on-site training and certification,  
The purpose for which the corporation is organized is:  
management, and technical support for pipeline installation.**ARTICLE IV SHARES**1  
The number of shares of stock is: \_\_\_\_\_**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Christian S. Hofmann, Owner

Address: 336 Burns Rd.  
Montoursville, PA 17754

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

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

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

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

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

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

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

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

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

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

FILED  
15 JUN 15 AM 10:02  
CLERK OF COURT  
JULIA A. HARRIS  
CLERK OF COURT

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: Phillip S. Hofmann  
Address: 501 Easenada Drive  
Orlando, FL 32825

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Christian S. Hofmann  
Address: 336 Burns Road  
Montoursville, PA 17754

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: \_\_\_\_\_ (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

5/20/15  
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

20 May 2015  
Date

FILED  
15 JUN 15 AM 10:02  
TALLAHASSEE, FLORIDA