

P/5000053680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

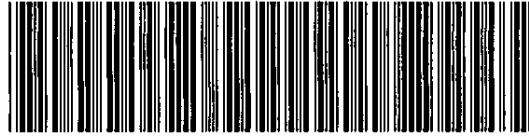
(Document Number)

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FILED  
15 JUN 18 PM 2:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 23 2015

S. GILBERT

## COVER LETTER

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

**SUBJECT:** SUPERIOR SCREEN & SUNROOMS 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

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

**ADDITIONAL COPY REQUIRED**

FROM: **SHERI RICHE**  
Name (Printed or typed)

**3269 SW 42 AVE**  
Address

**PALM CITY, FL 34990**  
City, State & Zip

**772-286-6086**  
Daytime Telephone number

**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)

FILED

ARTICLE I NAME

The name of the corporation shall be:

SUPERIOR SCREEN AND CONSTRUCTION INC

15 JUN 18 PM 2:05

ARTICLE II PRINCIPAL OFFICE

Principal street address

SECRETARY OF STATE  
MAILING ADDRESS: FLORIDA

3269 SW 42 AVE

PALM CITY, FL 34990

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

GENERAL CONTRACTING

FABRICATION AND INSTALLATION OF SCREEN ENCLOSURES, SCREEN ROOMS AND SUNROOMS

CONCRETE PATIOS AND FOOTINGS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SHERI RICHE, PRESIDENT

Name and Title:

Address 3269 SW 42 AVE

Address:

PALM CITY, FL 34990

Name and Title: Name and Title:

Address 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: SHERI RICHE

Address: 3269 SW 42 AVE

PALM CITY, FL 34990

**ARTICLE VII INCORPORATOR**

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

Name: SHERI RICHE

Address: 3269 SW 42 AVE

PALM CITY, FL 34990

**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.

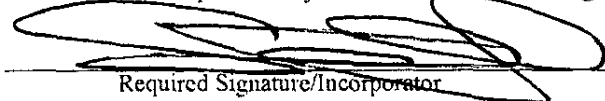
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Required Signature/Registered Agent

6/15/15  
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

6/15/15  
Date