

P15000055543

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☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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EFFECTIVE DATE 6-17-15

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JUN 15 PM 12:53

JUL 01 2015

T SCHROEDER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 17, 2015

JUSTIN MCMILLAN
240 E 3RD ST
ST GEORGE ISLAND, FL 32328

SUBJECT: SGI WATER WORKS, INC
Ref. Number: W15000041935

RECEIVED
15 JUN 30 AM 9:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SGI WATER WORKS, INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE LIST THE TITLES FOR THE OFFICERS LISTED IN ARTICLE V.,

The effective date is not acceptable since it is not within five working days of the date of receipt.

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.

Terri J Schroeder
Regulatory Specialist II

Letter Number: 115A00012720

COVER LETTER

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

SUBJECT: SGI Water Works, 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: Justin McMillan

Name (Printed or typed)

240 E 3rd Street

Address

St George Island FL 32328

City, State & Zip

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.

EFFECTIVE DATE 6-17-15

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: SGI Water Works, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

251 E Pine Ave

240 E 3rd Street

St George Island FL 32328

St George Island FL 32328

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Land Development and Real Estate

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Justin McMillan

V. President

Name and Title: _____

Address

240 E 3rd Street

Address: _____

St George Island FL 32328

Name and Title: Harold Denton Jr.

President

Name and Title: _____

Address

252 Harry Lane Blvd, Suite 100

Address: _____

Knoxville TN 37923

Name and Title: _____

Name and Title: _____

Address

Address: _____

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DIVISION OF CORPORATIONS
15 JUN 15 PM 12:53

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: Justin McMillan
Address: 240 E 3rd Street
St George Island FL 32328

ARTICLE VII INCORPORATOR

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

Name: Harold Denton Jr.
Address: 252 Harry Lane Blvd, Suite 100
Knoxville TN 37923

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: June 7th, 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

6/11/15
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

6/11/15
Date