

T SCHROEDER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 18, 2015

RANDY D NOE
157 SW FAIRWAY AVE
PORT ST LUCIE, FL 34983

SUBJECT: JUNK BUSTERS INC.
Ref. Number: W15000042256

We have received your document for JUNK BUSTERS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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: 215A00012831

COVER LETTER

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

SUBJECT: _____

Junk Busters 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: _____

Randy D. Noe

Name (Printed or typed)

157 S.W. Fairway Ave.

Address

Port Saint Lucie, FL 34983

City, State & Zip

772-971-5867

Daytime Telephone number

randynoe30@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:

Junk Busters ~~Inc~~ Express Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

157 SLS Fairway Ave
PSL, FL 34983

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ARTICLE IV SHARES

The number of shares of stock is:

50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Randy Noe

Name and Title:

P

Address

157 SLS Fairway Ave

Address:

PSL FL 34983

Same

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JUL -2 PM 12:14

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:

Randy Noe

Address:

157 SW Fairway Ave
PSL FL 34983

ARTICLE VII INCORPORATOR

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

Name:

Randy Noe

Address:

157 SW Fairway Ave
PSL FL 34983

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 JUL -2 PM 12:14

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

R. Noe

Required Signature/Registered Agent

6-10-15

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.

R. Noe

Required Signature/Incorporator

6-10-15

Date