

P15000067574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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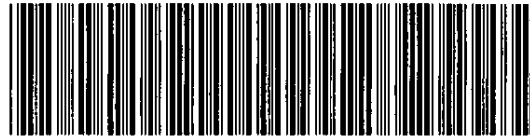
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2015 AUG -7 PM 2:41
SECRETARY OF STATE
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2/17/15

COVER LETTER

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

SUBJECT: macPat Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input checked="" type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee
	& Certificate of Status

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

ADDITIONAL COPY REQUIRED

FROM: Barbara Aho
Name (Printed or typed)

300 S Dixie Hwy B
Address

Lantana FL 33442

561-547-9950
Daytime Telephone number

Wallisaho@a.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: MACPAT, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5440 N Ocean Dr #805
Singer Island, FL 33404

5440 N Ocean Dr #805

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

conducting business as a manufacturer's
sales representative.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Patrick McCauley President

Address: 5440 N. Ocean Dr #805
Singer Island FL
33404

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FL 32310

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Barbara Aho
Address: 300 S. Dixie Hwy #B
Lantana FL 33462

ARTICLE VII INCORPORATOR

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

Name: Patrick McCauley
Address: 5440 N. Ocean Blvd #805
Singer Island, FL 33404

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: August 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

Barbara Aho
Required Signature/Registered Agent

7-27-15
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.

Patrick McCauley
Required Signature/Incorporator

7-28-15
Date