## 00013666

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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## **COVER LETTER**

FILED 15 SEP -4 PH 3-14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

۲.

SUBJECT: Solar Tex-A-I Coatings 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 CO	PY REQUIRED		
FROM:		(Printed or typed)	KOTH Ave		
	A	ddress .	<u> </u>		
WORTH PORT 1= C. 34287 City, State & Zip					
941 - 380 - 3848  Daytime Telephone number					
	E-mail address: (to be used	for future annual report in	otification)	-73	

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



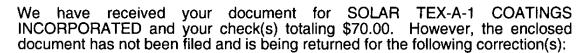
## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 4, 2015

WILLIAM JORDAN 8337 DOROTHY AVNEUE NORTH PORT, FL 34287

SUBJECT: SOLAR TEX-A-1 COATINGS INCORPORATED

Ref. Number: W15000052452



The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the corrected original and one copy of 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.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 215A00016370

SEP -4 PH 3 14

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporat	ion shall be: SoLar Tex	-A-1 COAT	rings	incorpore	ited
ARTICLE II PRINC	PAL OFFICE Principal street address OFOTHY AVE	1	Mailing address, is	different is:	<u>.</u>
NORTH FL. 3	Port +287			· · · · · · · · · · · · · · · · · · ·	
· · ·	e corporation is organized is:			•	_
	reorganilat			CFATION OF	<del></del>
6	& COATING			1.	
<del></del>				15 SEP	_
				表 F	- <del>-</del>
ARTICLE IV SHARE The number of shares of s	T <u>S</u> tock is: 100			ED PH 3: 14 PF STATE FLORIDA	
	L OFFICERS AND/OR DIRECTOR		6		1 .
	William Jor				dan
Address	PresideNT 4473 Persian		TRESSE	Kenwa	
	NORTH PORT FL			PORT F	•
Name and Title	Jesse Jordi	<del></del> -			
Address	e u			<del></del>	
Address	8605 Bomford				-
	WORTH PORT FL				
Name and Title:		Name and Title:	**************************************		-
Address _		Address:	······································		
			·- · · · · · · · · · · · · · · · · · ·	<del> </del>	

Name and Title:		Name and Title:	<del></del>
Address		Address:	
	*·····	<del>- · ,</del>	
		<del></del>	·
ARTICLE VI REGIS The name and Florida s	TERED AGENT street address (P.O. Box NOT acceptable) of	the registered agent is:	
Name:	STEPHEN JORDAN		
Address:	649 Kenwood or	<u>-</u>	S
	JORTH PORT FL	34287	E
ARTICLE VII INCOL	RPORATOR		FLOR
The name and address of	of the Incorporator is:	1	
Name:	STEPHEN JORG	daw	4
Address:	6649 Kenwood	1 Prive	
	NORTH PORT FL 34	1287	
(If an effective date is l	CTIVE DATE: nan the date of filing: lsted, the date must be specific and cannot		days prior or 90 business
days after the filing.)			
	d in this block does not meet the applicable date on the Department of State's records.	statutory filing requirements,	this date will not be listed as
Having been named as this certificate, I am fam	registered agent to accept service of process iliar with and accept the appointment as reg	for the above stated corporat istered agent and agree to act	ion at the place designated in in this capacity
Meth	ordon		6-20-15
0 1/1	Required Signature/Registered Agent		Date
I submit this document document to the Departm	and affirm that the facts stated herein are in the properties the state of State constitutes a third degree felony	true. I am aware that the fal v as provided for in s.817.155,	se information submitted in a F.S.
Jon/	brile		6 - 20 - 15 Date
Required Mg	hature/Incorporator		Date