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COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314 RECEIVED ANG 28 AND

SUBJECT:	Seloning Profe	essional Ser tename- <u>mustincl</u>	LUICES, INC.	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:				
•	\$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:	JAMES W. KE	//c, PA - (Printed or typed)	Jenny Gibbs	
14 South Lake Augune				
Avon Park, FLORIDA 33825 City, State & Zip				
		3 –7509 elephone number		
	Final address: (to be used	9 QO/, COM I for future annual report	notification)	

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

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ARTICLES OF INCORPORATION

The undersigned natural person, competent and licensed to practice law in the State of Florida, acting hereby as Incorporator for the purpose of forming a corporation for profit under the provisions of Section 607, Florida Business Corporation Act, of the Florida Statutes, does hereby adopt the following Articles of Incorporation.

NAMES OF CORPORATION

The name of this corporation shall be SEBRING PROFESSIONAL SERVICES, INC.

PRINCIPAL OFFICE

The principal offices of this corporation shall be those located at 4706 Leucadendra Drive, Sebring, Florida 33872.

The mailing address of this corporation shall be 4706 Leucadendra Drive, Sebring, Florida 33872.

Ш **PURPOSES**

The general nature and purposes of business to be transacted, promoted and carried on by the corporation are as follows:

- a. To invest its funds in real estate, mortgages, stocks bonds and any other type of investments permitted by law.
- b. To do everything necessary and proper in accomplishing the purposes herein set forth and to do anything incidental thereto which is not forbidden under the laws of the State of Florida.
- c. To help workers exchange research ideas and experience with one another and to increase their marketing abilities and capacities.

IV CAPITAL STOCK

The maximum number of shares that the corporation is authorized to have a. outstanding at any time shall be 100 shares of common stock at \$1.00 per share par value.

- b. The consideration to be paid for each share shall be payable in lawful money or property, labor or services.
- c. Shares of the corporation's stock and certificates shall be issued only to officers in good standing and duly licensed or otherwise legally authorized within the State of Florida to render the same professional services as this corporation.

V. INITIAL OFFICERS AND DIRECTORS

Name and Title

Director

Zachary Walkup

4706 Leucadendra Drive Sebring, Florida 33872

VI. REGISTERED AGENT

The address of this corporation's initial registered office is 4706 Leucadendra Drive, Sebring, Florida 33872 and the name if its initial registered agent at said address is **ZACHARY WALKUP**.

ZACHARY WALKUP

Registered Agent

STATE OF FLORIDA
COUNTY OF Histland

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State and County aforesaid to administer oaths and to take acknowledgments, personally appeared ZACHARY WALKUP, to me known or who presented as identification and who executed the foregoing instrument for the purposes described therein and who did/did not take an oath.

WITNESS my hand and official seal in the State and County last aforesaid this day of August, 2015.



NOTARYOUBLIC

State of:

Printed Name:

My Commission Expires

(SEAL)

VII INCORPORATOR

The name and address of the Incorporator is as follows:

ZACHARY WALKUP, 4706 LEUCADENDRA DRIVE, SEBRING, FLORIDA 33872

LACHARY WALKUP

STATE OF FLORIDA
COUNTY OF Highland

I HEREBY CERTIFY that on this day_before me, an officer duly authorized in the State and County aforesaid to administer oaths and to take acknowledgments, personally appeared ZACHARY WALKUP, to me known or who presented as identification and who executed the foregoing instrument for the purposes described therein and who did/did not take an oath.

WITNESS my hand and official seal in the State and County last aforesaid this ______ day of August, 2015.

JENNY GIBBS
MY COMMISSION # EE 123454
EXPIRES: December 19, 2015
Bonded Thru Budget Notary Services

State of:

Printed Name:

My Commission Expires

(SEAL)

CERTIFICATE OF DESIGNATION OF REGISTER AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the corporation is SEBRING PROFESSIONAL SERVICES, INC.
- 2. The name and address of the registered agent and office is

ZACHARY WALKUP

4706 LEUCADENDRA DRIVE

SEBRING, FLORIDA 33872

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.

ZACHARY WALKUP

DATE

DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FLORIDA 32314

15 AUG 28 PH 2: 28