

P15000100116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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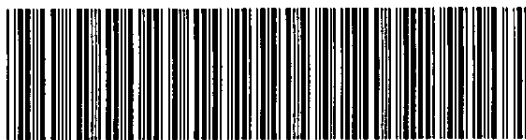
(Business Entity Name)

(Document Number)

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PHONE: (800) 435-9371; FAX: (866) 860-8395**

DATE: 12/18/15

NAME: AETNA GLASS TAMPA, INC

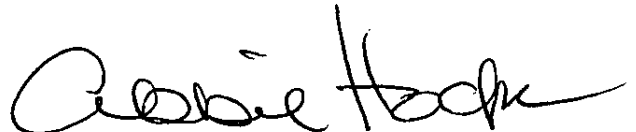
TYPE OF FILING: ARTICLES

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AUTHORIZATION: ABBIE/PAUL HODGE



COVER LETTER

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

SUBJECT: Aetna Glass Tampa, 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: Capitol Services – Corporate Filings Team
Name (Printed or typed)

206 E 9th St, Ste 1300

Address

Austin TX 78701

City, State & Zip

(800) 345-4647

Daytime Telephone number

craig.pope@att.net

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: Aetna Glass Tampa, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4768 Distribution Drive

Tampa, FL 33605-5922

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any lawful act, activity or business for which a corporation may be organized under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Craig M. Pope, Director

Name and Title: Craig M. Pope, President/Treasurer

Address 1001 Hampshire Lane

Address: 1001 Hampshire Lane

Suite 100

Suite 100

Richardson, TX 75080

Richardson, TX 75080

Name and Title: Michael A. Pope, Director/Chairman

Name and Title: _____

Address 1001 Hampshire Lane

Address: _____

Suite 100

Richardson, TX 75080

Name and Title: Christopher M. Pope, VP/Secretary

Name and Title: _____

Address 1001 Hampshire Lane

Address: _____

Suite 100

Richardson, TX 75080

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SECRETARY
TAMPA, FLORIDA

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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: Chad Allender
Address: 4768 Distribution Drive
Tampa, FL 33605-5922

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Craig M. Pope
Address: 1001 Hampshire Lane, Suite 100
Richardson, TX 75080

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

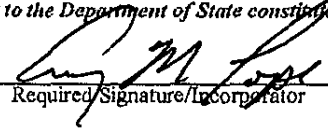


Required Signature/Registered Agent

12-15-2015

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

12-10-2015

Date

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DEPARTMENT OF STATE
CORPORATION - FLORIDA