

P16000004985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

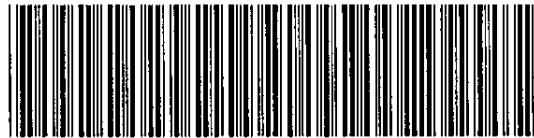
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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JAN 20 2016

T SCHROEDER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ARP 1102 INC

Signature _____

Requested by: BA

1/19/16

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

- ☒ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- ☒ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

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

ARTICLE I NAME

The name of this corporation shall be: ARP 1102 INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

110 BRIARCLIFF CIRCLE
SEBASTIAN, FL 32958

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The Number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DENNIS PARDON PRESIDENT

Address: 110 BRIARCLIFF CIRCLE
SEBASTIAN, FL 32958

Name and Title: SHANNON PARDON VICE PRESIDENT

Address: 110 BRIARCLIFF CIRCLE
SEBASTIAN, FL 32958

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ARTICLE VI REGISTERED AGENT

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

Name: DENNIS PARDON

Address: 110 BRIARCLIFF CIRCLE
SEBASTIAN, FL 32958

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DENNIS PARDON

Address: 110 BRIARCLIFF CIRCLE
SEBASTIAN, FL 32958

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.

/S/ DENNIS PARDON

Required Signature/Registered Agent

01/19/2016

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.

/S/ DENNIS PARDON

Required Signature/Incorporator

01/19/2016

Date

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