

P16000052312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

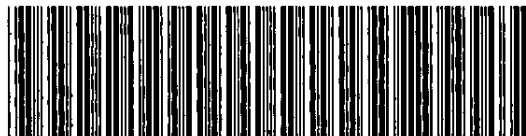
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT:

Knotty Designs, 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:

Robert WEICH
Name (Printed or typed)

1533 N.W. 2nd Ave
Address

FT. LAUD. FL 33311
City, State & Zip

954-247-7772

Daytime Telephone number

Knotty guy 78@gmail.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: KNOTTY DESIGNS, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1533 NW 2nd Avenue
Fort Lauderdale, FL 33311

Mailing address, if different is:

(Same)

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to install tile & do minor handyman
work

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Robert A. Welch - President Name and Title: _____

Address: 1533 NW 2nd Ave Address: _____
Fort Land. FL 33311

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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SECRETARY OF STATE
FLORIDA

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:

Robert A. Welch

Address:

1533 NW 2nd Avenue
Fort Lauderdale, FL 33311

President
(Robert Welch)

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Robert A. Welch

Address:

1533 NW 2nd Ave
Fort Lauderdale, FL 33311

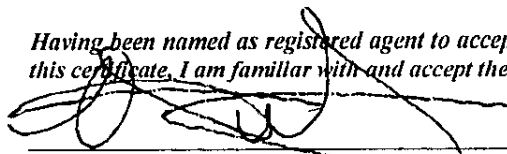
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 6/2/16 (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.

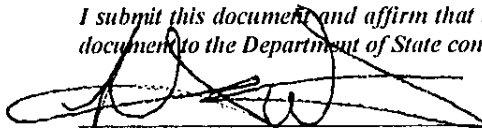
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

6/2/16
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

6/2/16
Date