

P16000080421

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

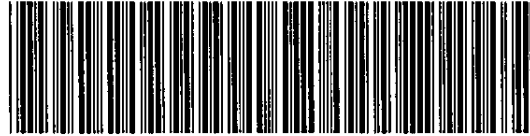
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

N. SAMS

OCT 04 2016



100288864391

10/03/16--01012--027 **78.75

2016 OCT -3 AM 8:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Oceanside Shutter And Paint, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Jamie Riley

Name (Printed or typed)

4601 Portage Trail

Address

Melbourne, FL 32940

City, State & Zip

(321) 210-0557

Daytime Telephone number

jriley1216@yahoo.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: Oceanside Shutter And Paint, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4601 Portage Trail

Melbourne, FL 32940

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business as a professional corporation

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jamie Riley - CFO/President

Address: 4601 Portage Trail
Melbourne, FL 32940

Name and Title: Jonathan Spradlin - VP of Finance

Address: 561 Fern Dr NE
Palm Bay, FL 32907

Name and Title: Jose Rivera - VP of Sales

Address: 2803 Rheims Ave
Melbourne, FL 32935

Name and Title: Joseph Slider - VP

Address: 743 Penguin Ave NE
Palm Bay, FL 32907

Name and Title: Sarah Olson - Secretary

Address: 4051 Friar Tuck Lane
Melbourne, FL 32935

Name and Title:

Address:

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: Jamie Riley
Address: 4601 Portage Trail
Melboure, FL 32940

2016 OCT -3 AM 8:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Jamie Riley
Address: 4601 Portage Trail
Melbourne, FL 32940

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

Jamie Riley 09/28/16
Required Signature/Registered Agent 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.

Jamie Riley 09/28/16
Required Signature/Incorporator Date