

P16000088590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

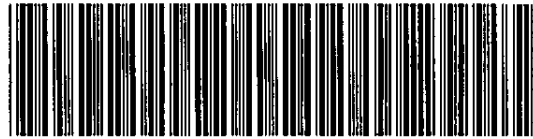
(Document Number)

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16 NOV -4 PM 1:50

7:46 PM

T. BURCH

NOV 4 2016

COVER LETTER

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

SUBJECT: _____

Florida Unites 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: _____

Aaron Nangle

Name (Printed or typed)

Po Box 6842

Address

Spring Hill FL 34611

City, State & Zip

727-841-8943

Daytime Telephone number

Clearchoice07@aol.com

E-mail address: (to be used for future annual report notification)

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

Aaron Nangle, President
Florida Unites Inc.
PO Box 6842
Spring Hill, FL 34611
Tel: (727) 841-8943
October 31, 2016

Mr. Tim Burch
Regulatory Specialist III
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Dear Mr. Tim Burch :

As discussed, enclosed please find:

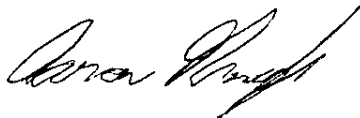
Copy of letter 916A00020384 and new Articles of Incorporation for Florida Unites Inc. I am the same owner and the only shareholder of both Florida Unites Inc., FEIN 27-2573879, Document #N10000004511 and Florida Unites Inc, Document W16000065447.

I am releasing the name Florida Unites Inc. to the new corporation. As you mentioned please apply the \$105 paid previously to the fee for filing the new corporation.

Please contact me if you have any questions. Thank you for your assistance.

Sincerely,

Aaron Nangle, President



Enclosures



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 22, 2016

AARON NAGLE
PO BOX 6842
SPRING HILL, FL 34611

SUBJECT: FLORIDA UNITES
Ref. Number: W16000065447

We have received your document for FLORIDA UNITES and your check(s) totaling \$105.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Florida Statutes prohibits a Florida non-profit corporation from being a party in a conversion. A Florida non-profit corporation may be a party in a merger; however, the Florida non-profit corporation must be the surviving entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist III

Letter Number: 916A00020384

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: Florida Unites Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
9395 Melrose St
Spring Hill FL 34608

Mailing address, if different is:
Po Box 6842
Spring Hill FL 34611

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To help individuals with
intellectual disabilities all across Florida.
I help them with free information resources.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Aaron Nangle - OWNER Name and Title: _____

Address Po Box 6842 Address: _____
Spring Hill FL 34611

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

16 NOV - 4 PM 5:50
CLERK OF COURT
STATE OF 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: Aaron Nangle

Address: 9395 Melrose St
Spring Hill FL 34608

ARTICLE VII INCORPORATOR

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

Name: Aaron Nangle

Address: 9395 Melrose St
Spring Hill FL 34608

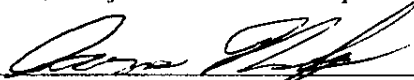
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10-31-16 (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

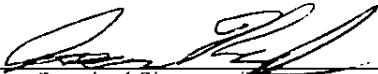


Required Signature/Registered Agent

10-31-16

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

10-31-16

Date

FILED
16 NOV -4 PM 4:50
HILL COUNTY CLERK
SPRING HILL, FL 34608