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COVER LETTER

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

SUBJECT: Tallahassee Window Tinting, 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: Lady Keels
Name (Printed or typed)

3419 Apalachee Parkway
Address

Tallahassee, FL 32311
City/State & Zip

850 322-4616
Daytime Telephone number

doctint@gmail
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:

Tallahassee Window Tinting Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3419 Apalachee Pkwy
Tallahassee FL 32311

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Window Tinting and car

Accessory service.

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

^{Lady Keads}
Name and Title: Owner / Manager

Name and Title:

Address

3419 Apalachee Pkwy
Tallahassee, FL 32311

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2016 NOV 17 PM 3:40
TALLAHASSEE, FL 32311

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: Lady Keels

Address: 3419 Apalachee Pkwy
Tallahassee FL

ARTICLE VII INCORPORATOR

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

Name: Lady Keels
Address: 3419 Apalachee Pkwy
Tallahassee FL

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 1-1-17 (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

11-16-2016
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.

Required Signature/Incorporator

11/16/2016
Date