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COVER LETTER

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

SUBJECT: MD Cooling & Heating 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: Margaret L. SCRIBNER & Dennis SCRIBNER
Name (Printed or typed)

9812 Jasmine Brook Circle
Address

Land O LAKES FL 34638
City, State & Zip

239- 471- 9999
Daytime Telephone number

Maggielaguene@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:

MD Cooling & Heating Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

9812 Jasmine Brook Circle
Land O LAKES FL 34638

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO Provide HVAC sales,
Service, Installation

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Margaret L. Scribner

Name and Title:

Vice President;

Address

9812 Jasmine Brook
Circle

Address:

Land O LAKES, FL 34638

Name and Title:

Dennis R Scribner

Name and Title:

President,

Address

9812 Jasmine Brook
Circle

Address:

Land O LAKES FL 34638

Name and Title:

Name and Title:

Address

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: DENNIS R SCRIBNER
Address: 9812 Jasmine Brook Circle
Land O Lakes FL 34638

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NOT A PUBLIC DOCUMENT

ARTICLE VII INCORPORATOR

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

Name: Margaret L. SCRIBNER and DENNIS R. SCRIBNER
Address: 9812 Jasmine Brook Circle
Land O Lakes FL 34638

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

Dennis R. Scribner
Required Signature/Registered Agent

11/11/2016
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

Marking

11/11/2016
Date