

P/6000093205

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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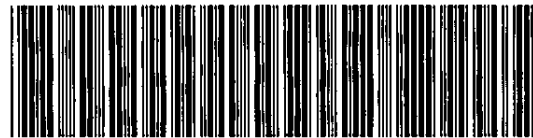
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE 11/23/16

W/6-06152

11/28/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 9, 2016

RUDOLPH LITCHMORE
200 AMBER BLVD.
AUBURNDALE, FL 33823

SUBJECT: PRECISE ELEVATOR INSPECTION & CONSULTATION, INC
Ref. Number: W16000076152

We have received your document for PRECISE ELEVATOR INSPECTION & CONSULTATION, INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of 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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 016A00024148

COVER LETTER

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

SUBJECT: Precise Elevator Inspection & Consultation, 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: Rudolph Litchmore

Name (Printed or typed)

200 Amber Blvd

Address

Auburndale, FL 33823

City, State & Zip

(561) 312-1858

Daytime Telephone number

rudolphalitchmore@yahoo.com

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

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

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DIVISION OF CORPORATIONS
2018 NOV 23 PM 2:15

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: Precise Elevator Inspection & Consultation, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

200 Amber Blvd

Auburndale, FL 33823

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide elevator inspection and consultation service for the safety of the general public

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kyle Litchmore, Vice president

Name and Title: Marcia Litchmore,, Director

Address 200 Amber Blvd

Address: 200 Amber Blvd

Auburndale, FL 33823

Auburndale, FL 33823

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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: Marcia Litchmore
Address: 200 Amber Blvd
Auburndale, FL 33823

ARTICLE VII INCORPORATOR

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

Name: Rudolph Litchmore
Address: 200 Amber Blvd
Auburndale, FL 33823

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2016 NOV 23 PM 2:15

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: November 23, 2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

Marcia Litchmore 11/23/2016
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.

Rudolph Litchmore 11/23/2016
Required Signature/Incorporator Date