

P170000527410

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

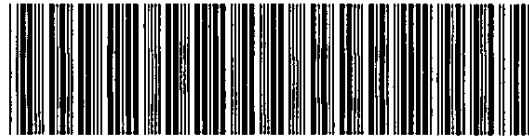
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/15/17--01016--010 **78.75

17 JUN 16 PM 2:21

RECEIVED
JUN 16 2017

M. MOON
JUN 16 2017

W17000050522



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 16, 2017

JONATHON BEMIS
2406 E STATE ROAD 60 SUITE 855
VALRICO, FL 33594 US

SUBJECT: SPM SERVICES, INC.
Ref. Number: W17000050522

We have received your document for SPM SERVICES, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

JUAN A REYES
Regulatory Specialist II

Letter Number: 117A00012281

17 JUN 16 PM 2:21
SEEKING
STATE
ID

6-13-17

I Chad Coughlin will not be using
SPM services Inc. and allow Jonathon
Bemis to use SPM services Inc.

Thank You


17 JUN 16 PM 2021

17 JUN 16 PM 2021

COVER LETTER

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

17 JUN 16 11:21

SUBJECT: SPM Services 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: Jonathan Bemis
Name (Printed or typed)

2406 E State Road 60 Suite 855
Address

Valrico FL 33594
City, State & Zip

813 735 4637
Daytime Telephone number

Jonathan 8788 @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: SPM Services Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2406 E State Rd 60 Suite 855

Valrico FL 33594

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Lawn Fertilization

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jonathan Benis President Name and Title: _____

Address 2406 E. State Rd 60 Address: _____

Suite 855

Valrico FL 33594

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: Jonathon Bemis

Address: 2406 E State Rd 60 Suite 855
Valrico FL 33594

ARTICLE VII INCORPORATOR

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

Name: Jonathon Bemis

Address: 2406 E State Rd 60 Suite 855
Valrico FL 33594

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 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

Jonathon Bemis

Required Signature/Registered Agent

6-13-17

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.

Jonathon Bemis

Required Signature/Incorporator

6-13-17

Date