

P170000071764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

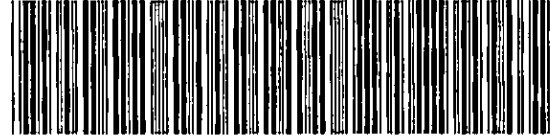
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/04/17--01012--009 **70.00

FILED
17 AUG 20 AM 8:31
FALLS CHURCH, VIRGINIA

✓17-064251

08/29/17



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 7, 2017

CLINT UMBRELL
1690 N. HWY. A1A
INDIALANTIC, FL 32903

SUBJECT: MARSHUM ENTERPRISES, INC.
Ref. Number: W17000064251

We have received your document for MARSHUM ENTERPRISES, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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: 817A00015932

RECEIVED
AUG 28 PM 2:37
DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
REGISTRATION SERVICES

Clint Umbrell

1690 N Hwy A1A
Indialantic, FL 32903
321-693-5258
cjumbrell@yahoo.com

July 26, 2017

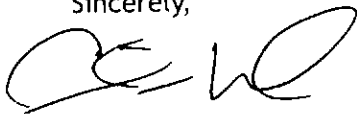
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Document Number P14000078336
American Pride Home Improvements Inc.

Dear Sir or Madam:

The above referenced corporation has been administratively dissolved and I am sending this letter as an affidavit that I will not attempt to reinstate it. Instead, I am attaching the Articles of Incorporation for a new corporation that has the same name, along with the required \$70 fee.

Sincerely,

A handwritten signature in black ink, appearing to be 'Clint Umbrell', written in a cursive style.

Clint Umbrell

COVER LETTER

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

SUBJECT: MARSHUM ENTERPRISES, 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 ☐ \$78.75
Filing Fee Filing Fee
& Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: MARSHUM ENTERPRISES, INC.

Name (Printed or typed)

1690 N Hwy A1A

Address

Indialantic, FL 32903

City, State & Zip

321-693-5258

Daytime Telephone number

cjumbrell@yahoo.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: MARSHUM ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1690 N Hwy A1A

Indialantic, FL 32903

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful purposes and activities.

ARTICLE IV SHARES

The number of shares of stock is: 100

17 AUG 28 AM 8:31
CLINT UMBRELL
ALL-STATE
FLORIDA

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Clint Umbrell, President

Name and Title: _____

Address 1690 N Hwy A1A

Address: _____

Indialantic, FL 32903

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: Clint Umbrell

Address: 1690 N Hwy A1A

Indialantic, FL 32903

ARTICLE VII INCORPORATOR

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

Name: Clint Umbrell

Address: 1690 N Hwy A1A

Indialantic, FL 32903

FILED
17 AUG 28 AM 8:31
STATE
TALLAHASSEE FLORIDA

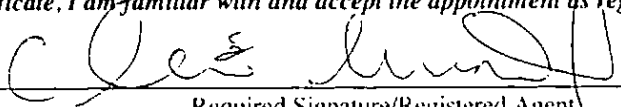
ARTICLE VIII EFFECTIVE DATE:

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


Required Signature/Registered Agent

8-21-17
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.


Required Signature/Incorporator

8-1-17
Date