

P170000 79540

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

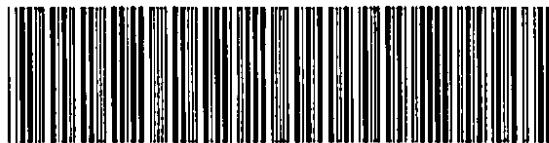
Special Instructions to Filing Officer:

Not valid
Email

Office Use Only

N. SAMS

OCT 05 2017



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10/04/17--01025--005 **78.75

FILED IN ORDER

17 OCT -4 PM 4:40

FILED

October 2, 2017

FILED
17 OCT -4 PM 4:40

Department of State
Division of Corporations

STATE OF FLORIDA
TALLAHASSEE, FLORIDA

P O Box 6327

Tallahassee, FL 32314

Reference Xpertair Inc. Florida Document Number P12000053237

Dear Department:

It has come to my attention that my corporation was dissolved for non payment of my annual report.

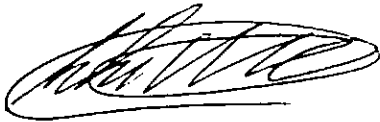
At this time I would like to release my florida document number P12000053237 for my corporation

Xpert Air Inc.

I am enclosing new articles that I would ask the department to process at this time.

Thanking you for your assistance with these matters.

Sincerely,



John McSweeney

President

Detail by Officer/Registered Agent Name

Florida Profit Corporation

XPERTAIR INC

Filing Information

Document Number P12000053237
FEI/EIN Number 45-5448366
Date Filed 06/12/2012
Effective Date 06/12/2012
State FL
Status INACTIVE
Last Event ADMIN DISSOLUTION FOR
ANNUAL REPORT
Event Date Filed 09/26/2014
Event Effective Date NONE

Principal Address

2713 NW 4TH ST
CAPE CORAL, FL 33993

Mailing Address

2713 NW 4TH ST
CAPE CORAL, FL 33993

Registered Agent Name & Address

SWAN, LAWRENCE
709 CAPE CORAL PKWY W
CAPE CORAL, FL 33914

Officer/Director Detail

Name & Address

Title P

MCSWEENEY, JOHN
2713 NW 4TH STREET
CAPE CORAL, FL 33993

Annual Reports

Report Year	Filed Date
2013	04/21/2013

Document Images

04/21/2013 -- ANNUAL REPORT	View image in PDF format
06/12/2012 -- Domestic Profit	View image in PDF format

COVER LETTER

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

SUBJECT: XPERTAIR 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: XPERTAIR INC

Name (Printed or typed)

2713 NW 4TH STREET

Address

CAPE CORAL, FL 33993

City, State & Zip

239-233-9669

Daytime Telephone number

JOHNMCWEENEY@COSTALCOOLINGINC.

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: XPERTAIR INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
2713 NW 4TH STREET
CAPE CORAL, FL 33993

Mailing address, if different is:
SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS PERTAINING TO AC SERVICES

ARTICLE IV SHARES

The number of shares of stock is: 100 SHARES @ \$1.00 PAR VALUE PE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOHN MCSWEENEY, PRESIDENT

Address: 2713 NW 4TH STREET
CAPE CORAL, FL 33993

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

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CLERK OF DISTRICT COURT
MIDDLESEX COUNTY
JANUARY 17 2017

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: RONALD ST. CLAIR
 Address: 709 CAPE CORAL PARKWAY W
CAPE CORAL, FL 33914

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 DEPARTMENT OF STATE, TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOHN MCSWEENEY
 Address: 2713 NW 4TH STREET
CAPE CORAL, FL 33914

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

Ronald St Clair, CPA

Required Signature/Registered Agent

10/2/17

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.

[Signature]

Required Signature/Incorporator

10/2/17

Date