

P18 000 001 224

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

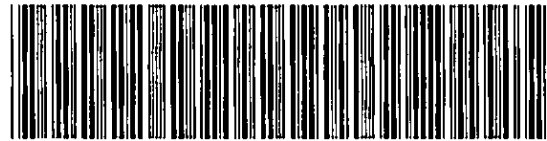
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/04/18--01014--018 **78.75

D O'KEEFE

JAN 05 2018

COVER LETTER

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

SUBJECT: AM-PRES Corporation

(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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: William O. Short
Name (Printed or typed)

14509 Salt Meadow Drive
Address

Pensacola, FL 32507
City, State & Zip

808.349.5560
Daytime Telephone number

short@am-pres.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

AM-PRES Corporation
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14509 Salt Meadow Drive

Pensacola, FL 32507

ARTICLE III PURPOSE

Consulting services in business management, healthcare information
The purpose for which the corporation is organized is: _____
technology and alternative energy.

ARTICLE IV SHARES

100

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William O. Short, President

Name and Title: Valerie O'Keeffe-Short, Vice President

Address: 14509 Salt Meadow Drive

Address: 14509 Salt Meadow Drive

Pensacola FL 32507

Pensacola FL 32507

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: Valerie O'Keeffe-Short

Address: 14509 Salt Meadow Drive

Pensacola FL 32507

ARTICLE VII INCORPORATOR

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

Name: William O. Short

Address: 14509 Salt Meadow Drive

Pensacola FL 32507

ARTICLE VIII EFFECTIVE DATE: January 1, 2018

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

12/27/2017

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

12/27/2017

Date