

P18000220462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

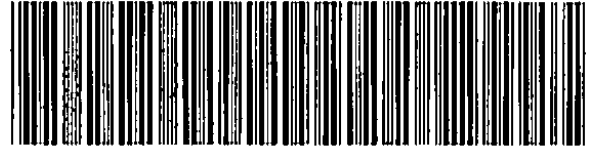
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D O'KEEFE
MAR 06 2018

COVER LETTER

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

SUBJECT: Gunstopapp,com 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
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: James K. Shirkey
Name (Printed or typed)

4063 SW 111th Court
Address

Lake Butler Florida 32054
City, State & Zip

352 672 3834
Daytime Telephone number

js
~~www~~ Gunstopapp@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: Gunstopapp.com Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4063 SW 11th Court
Lake Butler, Florida 32054

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Manufacture and distribute
weapon activating and deactivating
device and provide cell phone apps
to control the device

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JAMES K SHIRKEY

Name and Title: CEO, President

Address

4063 SW 11th Court
Lake Butler, Florida
32054

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE, FLORIDA

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: James K. Shirkey
Address: 4063 SW 111th Court
Lake Butler, Florida 32054

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ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James K Shirkey
Address: 4063 SW 111th Court
Lake Butler, Florida 32054

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

James K Shirkey
Required Signature/Registered Agent

2-25-18
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.

James K Shirkey
Required Signature/Incorporator

2-25-18
Date