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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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Out/Cod Codic				
Certified Copies Certificates of Status				
Considerations to Filips Officer				
Special Instructions to Filing Officer:				

Office Use Only

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SECKETARY OF STATE TALL AHASSEF, FLORIDA



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

SUBJECT: Robert S	Spicher Pump Service Inc. (PROPOSED CORPOR	ATÉ NAME – <u>MUST INCLI</u>	JDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status

Address Gibsonton, Fl. 33534 City. State & Zip 813-677-5878		Name (Printed or typed)
Gibsonton, Fl. 33534 City, State & Zip	8851 Richmond St.	
City. State & Zip		Address
·	Gibsonton, Fl. 33534	
813-677-5878		City. State & Zip
	813-677-5878	
Daytime Telephone number		Daytime Telephone number

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)

RTICLE II PRIF 851 Richmond St.	Principal <u>street</u> address	Mailing P. O. Box 353	address, if different is:
ibsonton, Fl. 33534		Riverview, Fl. 3	3568
000000000000000000000000000000000000000			_
RTICLE IV SHA	RES 100 shares		
RTICLE IV SHA e number of shares	RES 100 shares of stock is:		
e number of shares	RES 100 shares of stock is: TAL OFFICERS AND/OR DIRECTORS		201 Së
e number of shares	of stock is:		2018 HA SECKE TALLAH
e number of shares	TAL OFFICERS AND/OR DIRECTORS tle: 8851 Richmond St		AHAS I
ne number of shares RTICLE V INIT Name and Т	TAL OFFICERS AND/OR DIRECTORS tle: 8851 Richmond St	Name and Title:	HAY IS AHASSEE
ne number of shares RTICLE V INIT Name and Т	tle: 8851 Richmond St	Name and Title:	ONE TARY
e number of shares RTICLE V INIT Name and T	tle: 8851 Richmond St	Name and Title:	AHASSEE
e number of shares RTICLE V INIT Name and T Address	tle: 8851 Richmond St	Name and Title: Address:	HAY IS AM 9 99 AMASSEE, FLOWION
e number of shares RTICLE V INIT Name and T Address	tle: Gibsonton, Fl. 33534	Name and Title: Address: Name and Title:	HAY IS AM 9- 19 OKE TARY OF STATE AHASSEE, FLORION
e number of shares RTICLE V INIT Name and T Address Name and Tit	tle: Robert Spicher - President 8851 Richmond St Gibsonton, Fl. 33534	Name and Title: Address: Name and Title: Address:	HAY IS AM 9- 19 OKE TARY OF STATE AHASSEE, FLORION
RTICLE V INIT Name and T Address Name and Tit	tle: Robert Spicher - President 8851 Richmond St Gibsonton, Fl. 33534	Name and Title: Address: Name and Title: Address:	HAY IS AM 9- N9 ONE TARRY OF STATE AHASSEE, FLORION
RTICLE V INIT Name and T Address Name and Tit	tle: Robert Spicher - President 8851 Richmond St Gibsonton, Fl. 33534	Name and Title: Address: Name and Title: Address:	HAY IS AM 9- N9 ONE TARRY OF STATE AHASSEE, FLORION
Name and T Address Name and Tit Address	tle: Robert Spicher - President 8851 Richmond St Gibsonton, Fl. 33534	Name and Title: Address: Name and Title: Address: Address:	HAY IS AM 9 9 ONE TARRY OF STANE AMASSEE, FLORIDA

rante a	ind Title:	Same and True.	
Addres	ss		
			
ARTICLE VI	REGISTERED AGENT		
Name:	Florida street address (P.O. Box NOT accepta Raul Duran	ible) of the registered agent is:	
Address:	11280 Sophia Drive #2312		
	Temple Terrace, Fl. 33568		
	INCORPORATOR		
The <u>name and a</u>	iddress of the Incorporator is: Sherry Lauphear		
Name:			
Address:	10006 Vaughn St.		
	Gibsonton, Fl. 33534		
ARTICI F VIII	EFFECTIVE DATE: May 11 2018		
Effective date, i	fother than the date of filing: Stay 11, 2018	. (OPTIONAL)	
(If an effective filing.)	date is listed, the date must be specific and	cannot be more than five days prior or 90 days after the	
	e inserted in this block does not meet the appl		
Note: If the dat		scable statutory filing requirements, this date will not be listed as	
Note: If the dat the document's of	effective date on the Department of State's rec	icable statutory filing requirements, this date will not be listed as ords.	
the document's (effective date on the Department of State's rec	ords.	
the document's of the document	effective date on the Department of State's rec med as registered agent to accept service of p	ords.	
the document's of the document	effective date on the Department of State's rec med as registered agent to accept service of p am familiar with and accept the appointment	rords. rocess for the above stated corporation at the place designated i as registered agent and agree to act in this capacity May 11, 2018	
the document's of the document	effective date on the Department of State's rec med as registered agent to accept service of p	rocess for the above stated corporation at the place designated i as registered agent and agree to act in this capacity May 11, 2018	
Having been na this certificate. I	med as registered agent to accept service of p am familiar with and accept the appointment Required Signature/Registered Agen	rocess for the above stated corporation at the place designated i as registered agent and agree to act in this capacity May 11, 2018 Date In are true, I am aware that the false information submitted in	
Having been na this certificate. I	med as registered agent to accept service of p am familiar with and accept the appointment Required Signature/Registered Ager cument and affirm that the facts stated herei	rocess for the above stated corporation at the place designated i as registered agent and agree to act in this capacity May 11, 2018 Date In are true, I am aware that the false information submitted in	