

P18000084502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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OCT 17 2018



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U.S. DEPT. OF JUSTICE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 5, 2018

PAUL O'BRIEN
1915 TALLY RD
LEESBURG, FL 34748 US

SUBJECT: PAUL'S CYCLE REPAIRS AND ACCESSORIES, INC.
Ref. Number: W18000088459

We have received your document for PAUL'S CYCLE REPAIRS AND ACCESSORIES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 418A00020748

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RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: PAUL'S CYCLE REPAIRS AND ACCESSORIES, 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

<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: PAUL O'BRIEN
Name (Printed or typed)

1915 TALLY RD
Address

LEESBURG FL 34748
City, State & Zip

(308) 901-6959
Daytime Telephone number

JIMHARVER97@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 NAMEThe name of the corporation shall be: PAUL'S CYCLE REPAIRS AND ACCESSORIES INC.ARTICLE II PRINCIPAL OFFICEPrincipal ~~street~~ address

Mailing address, if different is:

1915 TALLY ROAD
LEESBURG, FL 34748ARTICLE III PURPOSEThe purpose for which the corporation is organized is: MOTORCYCLE REPAIRS
AND SALES OF PARTS AND ACCESSORIESARTICLE IV SHARESThe number of shares of stock is: ~~10~~ 1ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>PAUL O'BRIEN, ^{Pres.} Owner</u>	Name and Title:	<u>KAREN O'BRIEN, ^{DIR} Dir</u>
Address	<u>1916 SPRING LAKE RD</u> <u>DEWITLAND PARK, FL</u> <u>34731</u>	Address:	<u>1916 SPRING LAKE R</u> <u>DEWITLAND PARK, F</u> <u>34731</u>

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

18 OCT 16 PM 1:20

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: KAREN O'BRIEN

Address: 1916 SPRING LAKE RD
FRUITLAND PARK, FL 34731

ARTICLE VII INCORPORATOR

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

Name: PAUL O'BRIEN

Address: 1916 SPRING LAKE RD
FRUITLAND PARK, FL 34731

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TULASSEE, FLORIDA

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09-01-18 (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

Karen O'Brien
Required Signature/Registered Agent

09-25-18
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.

Paul O'Brien
Required Signature/Incorporator

09-25-18
Date