## P1900011569

(Requestor's Name)				
(Address)				
(Address)				
(0	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				
W19-9191				





01/23/13--01026--001 \*\*78.75

## **COVER LETTER**

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

SUBJECT:	INTRO, INC.				
	(PROPOSED CORPORA	ATE NAME - <u>MUST INCL</u>	UDE SUFFIX)		
Enclosed are an ori	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:		
□ \$70.00	S78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate of Status		
		ADDITIONAL CO	PPY REQUIRED		
FROM:	ephen Michael Snyder Nam 842 SW 16th Drive	e (Printed or typed)			
		Address			
O)	keechobee, Florida 34974				
	. State & Zip	<del></del>			
86	3 532 9144				
	Daytime *	Felephone number			
int	rolcompany@aol.com				
<del></del>	E-mail address: (to be use	ed 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 1 NAME The name of the corpora	ition shall be:	INTROL, INC.	
ARTICLE II PRINC	<u>CIPAL OFFICE</u> Principal <u>street</u> address	,	Mailing address, if different is: 7 16th Drive
Westminster, Maryland	1 21157	Okeechob	ee, Florida 34974
ARTICLE III PURPO The purpose for which,	OSE The corresponding is organized is:	lanufacture and Repa	ir of Custom Controls
	ES 5000 Shares  stock is:  4L OFFICERS AND/OR DIRECTORS		
Name and Titl	Stephen Michael Snyder, President	Name and Title:	Pamela Jane Snyder Secretary, Treasure
Address	13842 SW 16th Drive	Address:	13842 SW 16th Drive
	Okeechobee, Florida 34974		Okeechobee, Florida 34974
Name and Title	·	Name and Title:	
Address		Address:	
Name and Title	::	Name and Title:	

	· · · · · · · · · · · · · · · · · · ·			
Name a	nd Title:	Name and Title:		
Addres	s	Address:		
ARTICLE YI The name and I	REGISTERED AGENT  Florida street address (P.O. Box NOT acceptable)	e) of the registered agent is:		
Name:	Stephen Michael Snyder			
_	13842 SW 16th Drive	<del></del>		
	Okeechobee, Florida 34974			
ARTICLE VII	<u>INCORPORATOR</u>			
The pame and a	address of the Incorporator is:			
Name:	Stephen Michael Snyder			
Address:	13842 SW 16th Drive	<del></del>		
	Okeechobee, Florida 34974			
ADTICLE VIII	EFFECTIVE DATE:			
Effective date, i	f other than the date of filing:	(OPTION	NL)	
(If an effective filing.)	date is listed, the date must be specific and ca	nnot be more than five day:	s prior or 90 days after the	
Note: If the dat	te inserted in this block does not meet the applic	able statutory filing requireme	ents, this date will not be listed as	
the document's	effective date on the Department of State's reco	rds.		
	nmed as registered agent to accept service of pro			
this certificate, i	I am familiar with and accept the appointment a		o act in this capacity	
Styph	Required Signature/Registered Agent	,,	1/22/2019	
/			Date	
I submit this do document to the	cument and affirm that the facts stated herein Department of State constitutes a third degree i	are true. I am aware that th felony as provided for in s.817	e false information submitted in a 7.155, F.S.	
Strin	h. M. S. A.		1/22/2019	
Requ	aired Signature/Incorporator		Date	