

PI9000068258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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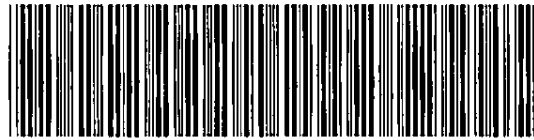
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2019 AUG 27 AM 10:24

SECRETARY OF
TREASURY
FALL AHAASST 01000

N. SAMS

SEP 05 2019

COVER LETTER

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

SUBJECT: McLean Corp. USA

(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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Peter Caltabiano

Name (Printed or typed)

2310 NE 47th Street

Address

Lighthouse Point, FL 33064

City, State & Zip

954-695-8268

Daytime Telephone number

pete@mcleancorpusa.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: McLean Corp. USA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2310 NE 47th St.

Lighthouse Point, FL 33064

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any legal purpose

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SECRETARY OF
CALIFORNIA

ARTICLE IV SHARES

The number of shares of stock is: 2000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Neil McLean, Director / President

Name and Title: Peter Caltabiano, Director / Treasurer

Address: 5263 Curlew Dr.

Address: 2310 NE 47th St.

Norfolk, VA 23502

Lighthouse Point, FL 33064

Name and Title: Jared Febroriello, Director / Secretary

Name and Title: _____

Address: 1920 McKinney Ave., Seventh Floor

Address: _____

Dallas, TX 75201

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: Peter Caltabiano
Address: 2310 NE 47th St.
Lighthouse Point, FL 33064

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Jared Febbrioriello
Address: 1920 McKinney Ave., Seventh Floor
Dallas, TX 75201

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

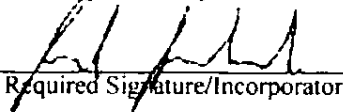


Required Signature/Registered Agent

7/18/19

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

7/18/19

Date