

P19000076560

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

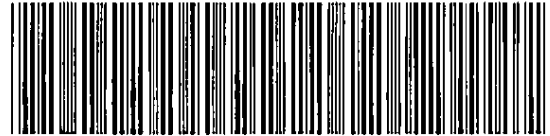
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T. SCOTT



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19 OCT 11 PM 2:29

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2019 OCT 11 PM 2:41
CLERK OF COURT
CLERK OF COURT

COVER LETTER

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

SUBJECT: GET GUTTERZ 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

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

ADDITIONAL COPY REQUIRED

FROM: EDDIE WARD

Name (Printed or typed)

PO BOX 669301

Address

POMPANO BEACH, FL 33066

City, State & Zip

561-707-2598

Daytime Telephone number

getgutterinc@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: GET GETTERZ INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1499 NW 6TH STREET

POST OFFICE BOX 669301

POMPANO BCH, FL 33069

POMPANO BEACH, FL 33066

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EDDIE WARD, PRESIDENT

Name and Title: _____

Address PO BOX 669301

Address: _____

POMPANO BEACH, FL 33066

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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2019 OCT 11 PM 2:44
CLERK OF DISTRICT COURT
FLORIDA
POMPANO BEACH

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: EDDIE WARD
Address: 1466 NW 6TH STREET
POMPANO BEACH, FL 33069

ARTICLE VII INCORPORATOR

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

Name: EDDIE WARD
Address: 1466 NW 6TH STREET
POMPANO BEACH, FL 33069

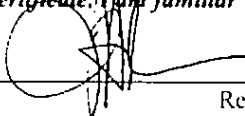
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/07/2019 (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

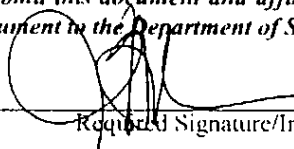


Required Signature/Registered Agent

10/8/19

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

10/8/19

Date