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CORPORATE ACCESS, _____

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INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PICK U	P: <u>01/17/2020</u>
 *x	CERTIFIED COPY PHOTOCOPY	
	CUS	
хx	FILING	INC
	SPIKERUSH IPC, INC.	
	(CORPORATE NAME AND DOCUMEN	Γ#)
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CCIA TRU	I. ICTIONS:	

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME The name of the corporat	SpikeRush IPC, Inc.		
ARTICLE II PRINCIPAL OFFICE Principal street address		Mailing ad	Idress, if different is:
8723 Spikerush Ln. Naples, FL 34109		-	
ARTICLE III PURPO The purpose for which the	DSE triple to the corporation is organized is:	ansacting any and all lawful business	
ARTICLE IV SHAR	ES 100 stock is:		ZOZO JAN 17 SECIETATA TALLAHASSE
	IL OFFICERS AND/OR DIRECT	<u>'ORS</u>	• .
Name and Title Address	Gary D. Langeman, DPST 8723 Spikerush Ln.	Name and Title: Address:	
	Naples, FL 34109		SF 55
Name and Title:		Name and Title:	
Address			
		Name and Title:	
Address		Address:	

Name and Title:		Name and Title:	
Address		Address:	
	REGISTERED AGENT		
The name and I		T acceptable) of the registered agent is:	
Name:	Jeff Novatt, Esq.		
Address:	1415 Panther Lane, Suite 327		
	Naples, FL 34109		
ABTICLEUM	ANGORDON (TOD		
AKTICLE VII	<u>INCORPORATOR</u>		
The name and a	ddress of the Incorporator is:		
Name:	Jeff Novatt, Esq.		
Address:	1415 Panther Lane, Suite 32	7	
	Naples, FL 34109		
Effective data it	EFFECTIVE DATE: f other than the date of filing:	(OPTION IN	
(If an effective of filing.)	date is listed, the date must be spe	. (OPTIONAL) cific and cannot be more than five days prior or 90 days after the	
Note: If the date the document's c	e inserted in this block does not mee effective date on the Department of	t the applicable statutory filing requirements, this date will not be listed as State's records.	
Having been na this certificate, I	med as registered agent to accept se am familiar with and accept the ap	tryice of process for the above stated corporation at the place designated in pointment as registered agent and agree to act in this capacity	
	hamme	Esq 01/17/2020	
	Required Signature Regist	ered Agent Date	
I submit this doc document to the	cument and affirm that the facts st Department of State constitutes a th	ated herein are true. I am aware that the false information submitted in a ird degree felony as provided for in s.817.155, F.S.	
//	annot i		
Requ	ired Signature/Incorporator	Sq. 01/17/2020 Date	
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