

P20000025069

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

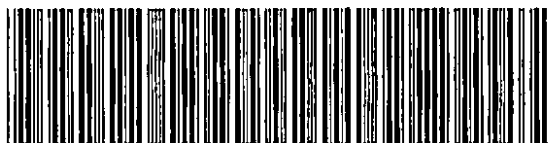
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MAR 24 2020

T. SCOTT



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03/02/20--01011--015 **350.00

FILED
2020 MAR -2 AM 10:00
FEB 24 2020

I, Seth Doranth, am President of SethCorp, Inc with Document number P18000014918. I am the sole owner of SethCorp, Inc with 100% ownership. I wish to completely dissolve SethCorp, INC with Document number P18000014918.

Attached are the articles and payment for a new Company - SethCorp, Inc that i wish to instate.

Please contact me if you have any questions

Seth Doranth
941-809-7961
sdoranth@gmail.com

COVER LETTER

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

SUBJECT: Seth Corp, 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 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

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

ADDITIONAL COPY REQUIRED

FROM: Seth Doranth
Name (Printed or typed)
218 E Bearss Ave #123
Address
Tampa, FL 33613
City, State & Zip
941-809-7961
Daytime Telephone number
sdoranth@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: SETHCORP, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5147 Cypress Palms Ln
Tampa, FL 33647

315 E Bay St Ave #123
Tampa, FL 33613

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: 1,000,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Seth Dornath, President

Name and Title: _____

Address 5147 Cypress Palms Ln
Tampa, FL 33647

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2020 MAR -2 AM 10:00

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: Seth Doran
Address: 5147 Cypress Palms Ln
Tampa, FL 33647

ARTICLE VII INCORPORATOR

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

Name: Seth Doran
Address: 5147 Cypress Palms Ln
Tampa, FL 33647

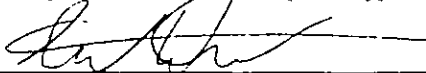
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 02/12/2020 (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

02/12/20

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

02/12/20

Date