

P20000067302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



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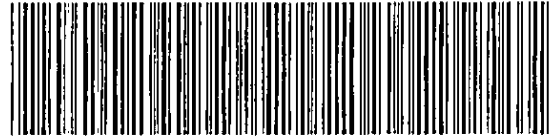
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2020 AUG 31 PM 3:29 TALLAHASSEE, FL
SECRETARY OF STATE

2020 AUG 31 AM 9:39

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COVER LETTER

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

SUBJECT: X-MEN Extreme Construction Group? Retail 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: Kenneth Michaels
Name (Printed or typed)
2756 Hawksfield Rd.
Address
Tallahassee, FL 32303
City, State & Zip
850-210-3478
Daytime Telephone number
MicKensKenneth@yahoo.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: X-MEN Extreme Construction Group INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
919 Old Bainbridge Rd.
Tallahassee, FL 32303

Mailing address, if different is:
2786 Hartsfield Rd
Tallahassee, FL 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Small Repair on Residential and Commercial
Building & Retail sales

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TALLAHASSEE, FL

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ARTICLE IV SHARES

The number of shares of stock is: 10,5 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Kenneth MICKENS</u>	Name and Title:	<u>Brandon MICKENS</u>
Address	<u>2786 Hartsfield Rd</u> <u>Tallahassee, FL 32303</u> <u>CEO</u>	Address:	<u>2786 Hartsfield Rd</u> <u>TALLA. FL 32303</u>

V.P.	Name and Title:	<u>Frankie & Johnnie's Retail</u>	Name and Title:	<u>Chalisa Davis</u>
	Address	<u>919 Old Bain Bridge</u> <u>Tallahassee, FL 32303</u> <u>Vice President</u>	Address:	<u>1506 Talc St</u> <u>TALLA. FL 32310</u> <u>C.F.O.</u>

V.P.	Name and Title:	<u>EXTREME Construction INC</u>	Name and Title:	<u>Patrice MICKENS</u>
	Address	<u>2786 Hartsfield Road</u> <u>TALLA FL 32303</u>	Address:	<u>3886 Castleberry Dr</u> <u>TALL FL 32304</u> <u>A C.F.O</u>

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: KENNETH MICKENS

Address: 2786 Hartsfield Rd.

Tallahassee, FL 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kenneth Mickens

Address: 2786 Hartsfield Rd

TALLA. FL 32303

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: August 31, 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

Kenneth Mickens

Required Signature/Registered Agent

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.

Kenneth Mickens

Required Signature/Incorporator

Date

8/31/2020

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TALLAHASSEE, FL

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