P21000034211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: troszak us 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: Douglas Troszak
Name (Printed or typed)

130 Darst Avenue
Address

Punta Gorda, Florida 33950
City, State & Zip

(248) 961-2375
Daytime Telephone number

doug@troszak.us
E-mail address: (to be used for future annual report notification)

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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: troszak US inc

ARTICLE II PRINCIPAL OFFICE

Principal **street** address

130 DARST AVENUE
PUNTA GORDA, FLORIDA
33950

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: All legal commerce

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ARTICLE IV SHARES
The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Douglas Troszak PRESIDENT
Address: 130 Darst Avenue
PUNTA GORDA, FL 33950

Name and Title: Douglas Troszak Director
Address: 130 Darst Avenue
PUNTA GORDA, FL 33950

Name and Title: Douglas Troszak Treasurer
Address: 130 Darst Avenue
PUNTA GORDA, FL 33950

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
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: Douglas Troszak

Address: 130 Darst Avenue

Punta Gorda, Florida 33950

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ARTICLE VII INCORPORATOR

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

Name: Douglas Troszak

Address: 130 Darst Avenue

Punta Gorda, Florida 33950

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

_____ March 3, 2021

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.

_____ March 3, 2021

Required Signature/Incorporator Date