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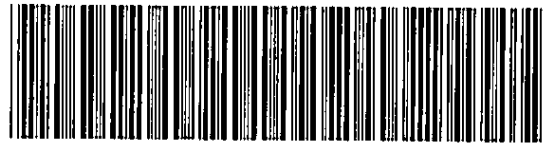
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06/08/21--01012--018 **87.50

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2021 JUN -8 AM 11:15

COVER LETTER

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

SUBJECT: SUNSHINE TAGS & TITLES 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: MARKELL K. WILLIAMS

Name (Printed or typed)

1030 NW 197th TER.

Address

MIAMI, FL. 33169

City, State & Zip

9548602522

Daytime Telephone number

Markellwilliams84@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: SUNSHINE TAGS & TITLES INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1030 NW 197th TER.

MIAMI, FL. 33169

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS PERFORMED BY A TAG

AGENCY COURIER SERVICE, SUCH AS DECAL RNEWALS, REGISTRATIONS AND TITLES WORK. TO INCLUDE

DISTRIBUTION OF VARIOUS STATE REQUIRED FORMS AND DOCUMENTS.

ARTICLE IV SHARES

The number of shares of stock is: 100 PAR SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MARKELL K. WILLIAMS

Name and Title: _____

Address 1030 NW 197th TER.

Address: _____

MIAMI, FL. 33169

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2021 JUN -2 AM 11:15
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11:00

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: MARKELL K. WILLIAMS

Address: 1030 NW 197th TER.

MIAMI, FL. 33169

ARTICLE VII INCORPORATOR

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

Name: MARKELL K. WILLIAMS

Address: 1030 NW 197th TER.

MIAMI, FL. 33169

ARTICLE VIII EFFECTIVE DATE: 06/04/2021

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



Required Signature/Registered Agent

06/04/2021

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

06/04/2021

Date