

P22000003619

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

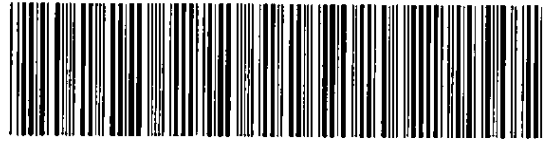
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 JAN 18 PM 4:45

CLERK OF STATE
TALLAHASSEE, FL

RECEIVED

2022 JAN 18 AM 10:50

CLERK OF STATE
TALLAHASSEE, FLORIDA

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 1/18-21

****WALK IN****

ENTITY NAME Stark Shaw Mechanical, Inc.

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 78.75

ACCOUNT # I20140000108
United Corporate
Services, Inc.

Keith Heppard

Please call Tira at the above number for any issues or concerns. Thank you so much!

COVER LETTER

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

SUBJECT: Stark Shaw Mechanical, 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: Brian N. Lewandowski, Esq.

Name (Printed or typed)

721 Center Road

Address

West Seneca, NY 14224

City, State & Zip

(716)-674-4710

Daytime Telephone number

blewandowski@lewandowskiandassoc.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: Stark Shaw Mechanical, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
997 West Kennedy Blvd

Suite 14a
Orlando, FL 32810

Mailing address, if different is:

95 Stark Street
Tonawanda, NY 14150

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: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Geiger, Timothy, J. - President

Address 1814 Roland
Sarasota, FL 34231

Name and Title: _____

Address: _____

Name and Title: Donovan, Dennis, J. - Executive Chairman

Address 19 Coolidge Road
Buffalo, NY 14220

Name and Title: _____

Address: _____

Name and Title: Urschel, Randy, P. - Chief Executive Officer

Address 7440 Kenfield Road
Clarence Center, NY 14032

Name and Title: _____

Address: _____

SECRETARY OF STATE
TALLAHASSEE, FL

2022 JAN 18 PM 4:45

FILED

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: MC2, Inc.
Address: 2290 West Airport Blvd
Sanford, FL 32771

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Brian N. Lewandowski, Esq.
Address: 721 Center Road
West Seneca, NY14224


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



Required Signature/Registered Agent

12/10/21
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.