

P 22000682370

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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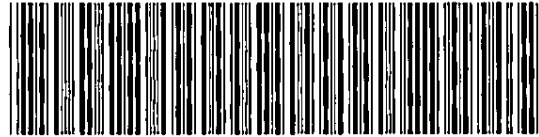
(Business Entity Name)

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# CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312  
850-656-4724

Date: 10/31/2022

Acc#I20160000072

*an: c 12/11*

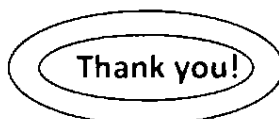
Name:	Precision to the Micron Inc.
Document #:	
Order #:	14613582

Certified Copy of Arts & Amend:	<input type="checkbox"/>			
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Ref# _____

Amount: \$ 78.75



# 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: Precision to the Micron Inc.

## ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

5676 SW 40th Place

Ocala, Florida 34474

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: service and calibrate precision measuring equipment

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## ARTICLE IV SHARES

The number of shares of stock is: 200

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Christopher J. Paprocki, Director

Name and Title: Christopher J. Paprocki, President

Address: 5676 SW 40th Place

Address: 5676 SW 40th Place

Ocala, Florida 34474

Ocala, Florida 34474

Name and Title: Andrea Paprocki, Secretary

Name and Title: Andrea Paprocki, Treasurer

Address: 5676 SW 40th Place

Address: 5676 SW 40th Place

Ocala, Florida 34474

Ocala, Florida 34474

Name and Title:

Name and Title:

Address:

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: C T Corporation System \_\_\_\_\_

Address: 1200 South Pine Island Road Plantation, \_\_\_\_\_

FL 33324 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: Ian Klak \_\_\_\_\_

Address: 50 Fountain Plaza, Suite 1700 \_\_\_\_\_

Buffalo, New York 14202 \_\_\_\_\_

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: upon 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*

By: C T Corporation System \_\_\_\_\_ 10-31-22  
*John Flynn* Assistant Secretary \_\_\_\_\_  
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.*

/s/ Ian Klak \_\_\_\_\_ 10/31/2022  
Required Signature/Incorporator Date

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