

P23000020311

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

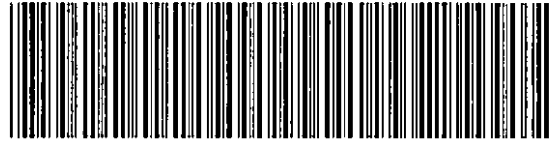
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800402998468

S. CHINA (11/17/16)  
MAR 16 2023

03/08/23--01001--019 \*\*79.75

**FILED**  
2023 MAR 16 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE, FL

**CORPORATE  
ACCESS;  
INC.**

*When you need ACCESS to the world*

236 East 6th Avenue, Tallahassee, Florida 32303  
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

**WALK IN**

**PICK UP:** CAT 3/16

- CERTIFIED COPY** \_\_\_\_\_
- PHOTOCOPY** \_\_\_\_\_
- xx** **CUS** GS \_\_\_\_\_
- xx** **FILING** \_\_\_\_\_

1. NAPLES LEASING, INC.  
(CORPORATE NAME AND DOCUMENT #)
2. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
3. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
4. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
5. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)
6. \_\_\_\_\_  
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL INSTRUCTIONS:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## COVER LETTER

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

**SUBJECT:** Naples Leasing, 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:** Hunter Stahl - Threlkeld Law, P.A.  
Name (Printed or typed)

3003 Tamiami Trail N, Suite 400  
Address

Naples, FL 34103  
City, State & Zip

(239) 234-5034  
Daytime Telephone number

hunter@napleslegal.net  
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: Naples Leasing, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal **street** address

Mailing address, if different is:

4400 Gulf Shore Blvd. #102

Naples, FL 34103

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business purposes.

**FILED**  
2023 MAR 15 PM 3:16  
SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Richard Gladden - P Name and Title: Sandra Gladden - VP

Address 4400 Gulf Shore Blvd. #102 Address: 4400 Gulf Shore Blvd. #102  
Naples, FL 34103 Naples, FL 34103

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

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: Threlkeld Law, P.A.  
 Address: 3003 Tamiami Trail N. Suite 400  
Naples, FL 34013

FILED  
 2023 MAR 16 PM 3:16  
 SECRETARY OF STATE  
 TALLAHASSEE, FL

**ARTICLE VII INCORPORATOR**

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

Name: Tyler H. Stahl  
 Address: 3003 Tamiami Trail N. Suite 400  
Naples, FL 34103

**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*

Tyler H. Stahl 03/16/2023  
 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.*

Tyler H. Stahl 03/16/2023  
 Required Signature/Incorporator Date