

P95000044160

SAL J. Lupo  
11958 Branch Mooring Dr.  
Tampa FL 33635  
(City, State, Zip) (Phone #)

OFFICE USE ONLY

EFFECTIVE DATE

May 25, 1995

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. S L A, INC. (Corporation Name) (Document #)
2. (Corporation Name) (Document #) 300001502113  
-05/31/95--01062--015
3. (Corporation Name) (Document #) \*\*\*\*122.50 \*\*\*\*122.50
4. (Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

FILED  
05 MAY 30 AM 11:23  
TAMPA, FLORIDA

Examiner's Initials

SAB  
6/8/95

EFFECTIVE DATE

May 25, 1995

ARTICLES OF INCORPORATION

OF

S L A INC.

FILED

95 MAY 30 11 11:23

CLERK OF DISTRICT COURT  
JUDICIAL CIRCUIT IN FLORIDA

The undersigned, a natural person, competent to contract, hereby subscribes to these Articles of Incorporation in order to form a corporation under the laws of the State of Florida.

ARTICLE I

NAME: The name of the corporation is:

S L A INC.

ARTICLE II

NATURE OF BUSINESS: This corporation may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III

CAPITAL STOCK: The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is One Thousand (1,000) shares of common stock having a nominal or par value of One Dollar (\$1.00) per share.

ARTICLE IV

INITIAL CAPITAL: The amount of capital with which this corporation will begin business is Three Hundred Dollars (\$300.00).

ARTICLE V

TERM OF EXISTENCE: This corporation is to begin its corporate existence on May-25-1995, and is to exist perpetually thereafter.

ARTICLE VI

REGISTERED OFFICE AND AGENT: The street address of the initial registered office of this corporation is 11858 BRANCH MOORING Dr. TAMPA FL 33635 and the name of the corporation's initial registered agent at such address is SAL J. LUPO

ARTICLE VII

DIRECTORS: This corporation will have one (1) director initially. The number of directors may be increased or diminished from time to time by the By-Laws adopted by the stockholders, but the number of directors shall not be less than one (1).

ARTICLE VIII

INITIAL DIRECTORS: The name and street address of the member of the FIRST BOARD OF DIRECTORS is:

<u>Name</u>	<u>Address</u>
SAL J. LUPO	11858 BRANCH MOORING Dr. TAMPA FL 33635

ARTICLE IX

SUBSCRIBERS: The name and address of the subscriber of these Articles of Incorporation and the number of shares agreed to take and the value of the consideration therefor are:

<u>Name</u>	<u>Address</u>	<u>Shares</u>	<u>Consideration</u>
SAL J. LUPO	11858 BRANCH MOORING Dr. TAMPA FL 33635	300	\$ 300.00

ARTICLE X

AMENDMENT: These Articles of Incorporation may be amended in the manner provided by law.

  
SAL J. LUPO

STATE OF FLORIDA       )  
COUNTY OF HILLSBOROUGH )

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County aforesaid, personally appeared SAL J. Lupo to me known to be the person described in and who executed the Articles of Incorporation above, and acknowledged before me that he subscribed these Articles of Incorporation.

WITNESS my hand and official seal this 25 day of May, 1995

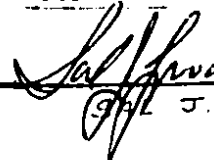
"Personally Know"

  
NOTARY PUBLIC, STATE OF FLORIDA.  
MY COMMISSION EXPIRES: Nov. 3, 1995.  
BONDED THRU NOTARY PUBLIC UNDERWRITERS.

ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the above-stated corporation, at the place designated herein, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

Dated May 25 1995

  
SAL J. Lupo

FILED  
95 MAY 30 PM 11:23  
CLERK OF DISTRICT COURT  
JUDICIAL DISTRICT NO. 1  
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT  
DOCUMENT #



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 SEP 25 AM 8:25

1 Corporation Name  
SLA INC.

P95000044160

Principal Place of Business

11858 BRANCH MOORING DR.  
TAMPA FL 33635

Mailing Address

11858 BRANCH MOORING DR.  
TAMPA FL 33635

If above addresses are incorrect in any way, line through incorrect information and enter correction below.  
2 New Principal Office Address, if Applicable

3 New Mailing Office Address, if Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4 Date Incorporated or Qualified  
To Do Business in Florida

05/25/1995

5 FEI Number

59-3321394

Applied For

Not Applicable

6 CERTIFICATE OF STATUS DESIRED ☐

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D	LUPO, SAL J	11858 BRANCH MOORING DR.	TAMPA FL 33635

700001975307--1  
-10/15/96--01216--025  
\*\*\*\*375.00 \*\*\*\*375.00

8. Name and Address of Current Registered Agent

LUPO, SAL J  
11858 BRANCH MOORING DR.  
TAMPA FL 33635

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.  
Date 9/19/96

Signature of  
Registered Agent

REGISTERED AGENT MUST SIGN

(See other side for information  
on intangible tax.)

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(f), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SAL J LUPO

9/19/96 813-239-9577  
Date Daytime Phone