

P97000103799

FLORIDA STATE COMPLAINT

Transmittal Letter

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

000002353010--8  
-11/20/97--01073--007  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: RONNIE SETSERS CUSTOM INC.  
(Proposed corporate name - must include suffix)

Enclosed is an original and one copy of the articles of incorporation and check for:

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing fee  
& Certified Copy

☐ \$131.25  
Filing fee,  
Certified Copy,  
& Certificate

Additional Copy Required

FROM: RONNIE SETSER

Name (printed or typed)

732 1/2 N. DAKE MARY HWY.

Address

TAMPA FL. 33609

City, State & Zip

(813) 879-1616 OR (813) 931-4791

Daytime Telephone Number

Note: Please provide the original and one copy of the articles.

FILED  
97 DEC -9 AM 9:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12/9/97



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

November 24, 1997

RONNIE SETSER  
732 1/2 N. DALE MABRY HWY  
TAMPA, FL 33609

SUBJECT: RONNIE SETSERS CUSTOM, INC.  
Ref. Number: W97000026431

We have received your document for RONNIE SETSERS CUSTOM, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

THE FORM SUBMITTED IS NOT ACCEPTABLE FOR FILING. (1) IS DOUBLE SIDED AND (2) DOESN'T HAVE AN INCORPORATOR'S SIGNATURE.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6933.

Dana Calloway  
Document Specialist

Letter Number: 497A00056115

**ARTICLES OF INCORPORATION**

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

FILED  
97 DEC -9 AM 9:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

RONNIE SETSERS CUSTOM, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business and mailing address of this corporation shall be:

732 1/2 N. DAKE MADRY Hwy.  
TAMPA FL. 33609

**ARTICLE III SHARES**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES, PAR \$1.00

**ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS**

The name and address of the initial registered agent is:

RONNIE SETSER  
317 E. AZALEA AVE.  
TAMPA FL. 33612

**ARTICLE V INCORPORATOR(S)**

**See instructions for officers/directors**

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):


RONNIE SETSER = PRESIDENT  
AND  
KIMBERLY SETSER = VICE PRESIDENT  
317 E. AZALEA AVE.  
TAMPA FL. 33612

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

3<sup>RD</sup> day of DECEMBER, 1997

(An additional article must be added if an effective date is requested.)

Kimberly Setzer  
Signature

  
Signature

\_\_\_\_\_  
Signature

**Notarization is not required**

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is RONNIE SETSERS CUSTOM, INC.


2. The name and address of the registered agent and office is:

RONNIE SETSER  
(NAME)

317 E. AZALEA AVE.  
(P. O. Box or Mail Drop Box **NOT** ACCEPTABLE)

TAMPA FL. 33612  
(CITY/STATE/ZIP)

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(SIGNATURE)

12-3-97  
(DATE)

DIVISION OF CORPORATIONS, P. O. BOX 6327, TALLAHASSEE, FL 32314

FILED  
97 DEC -9 AM 9:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA