

SP03000017946

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

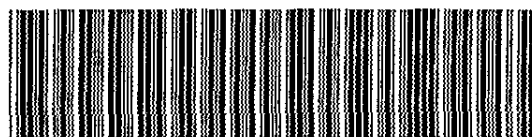
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. BLALOCK FEB 14 2003

TRANSMITTAL LETTER

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

SUBJECT: Wellcraft Fabrication 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: Robert F. Hampton
Name (Printed or typed)

6684-5 Columbia Park Dr. S.
Address

Jacksonville, FL 32258
City, State & Zip

904-509-1817
Daytime Telephone number

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:

Wellcraft Fabrication Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6684-5 Columbia Park Dr. So
Jax., FL 32258

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Start a new business

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Robert F. Hampton / President
4051 Livingston Rd
Jax., FL 32257

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

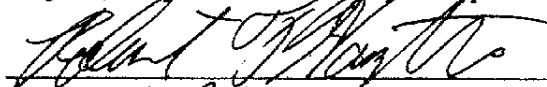
Robert F. Hampton
4051 Livingston Rd
Jax., FL 32257

ARTICLE VII INCORPORATOR

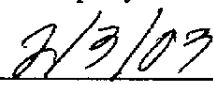
The name and address of the Incorporator is:

Robert F. Hampton
4051 Livingston Rd
Jax., FL 32257

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



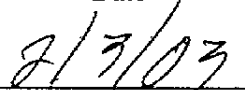
Signature/Registered Agent



Date



Signature/Incorporator



Date