

PO6000/40119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

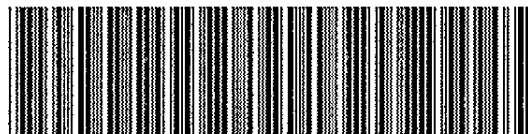
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800081325678

11/03/06 --01021--001 \*\*70.00

FILED  
NOV 13 2006  
FBI - MEMPHIS

*Dr*

## COVER LETTER

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

SUBJECT: Leslie Drywall, 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: Samantha Jane Leslie

Name (Printed or typed)

85 Laguna Forest Trail

Address

Palm Coast, FL 32164

City, State & Zip

727-243-1962

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:

Leslie Drywall, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

85 Laguna Forest Trail, Palm Coast, FL 32164

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Residential and commercial drywall.

### **ARTICLE IV SHARES**

The number of shares of stock is:

5,000

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

List name(s), address(es) and specific title(s):

Samantha Jane Leslie, 85 Laguna Forest Trail, Palm Coast, FL 32164 President, Director

### **ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Samantha Jane Leslie, 85 Laguna Forest Trail, Palm Coast, FL 32164

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Samantha Jane Leslie, 85 Laguna Forest Trail, Palm Coast, FL 32164

\*\*\*\*\*

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