

P 0000000092

TRANSMITTAL LETTER

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

FILED
99 DEC 23 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT:

Philip Jacobs Drywall Inc.
(Proposed corporate name - must include suffix)

300003079643-4
-12/23/99-01071-006
*****78.75 *****78.75

Enclosed is 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:

Philip Jacobs
Name (Printed or typed)

115 E 145th AVE.
Address

Tampa, Florida 33613
City, State & Zip

813-264-4800
Daytime Telephone Number

F. O'NEILL JAN 3 1999

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

Philip Jacobs Drywall Inc.

ARTICLE II PRINCIPAL OFFICE

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

115 E. 145th AVE. TAMPA, FLORIDA 33613

ARTICLE III SHARES

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

1,000 SHARES AT 1.00 PAR VALUE

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

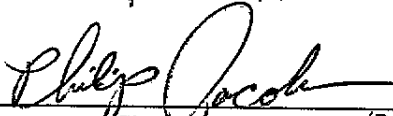
The name and Florida street address of the initial registered agent are:

Philip Jacobs 115 E. 145th AVE. TAMPA, FLORIDA 33613

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

Philip Jacobs 115 E. 145th AVE. TAMPA, FLORIDA 33613



Signature/Incorporator/Registered Agent

Date

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

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 obligation of my position as registered agent.

in
comply with
the

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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