

P01000118360

TRANSMITTAL LETTER

FILED  
01 DEC 13 AM 10:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

000004724180--7  
-12/13/01--01027--015  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

SUBJECT: C. Pullen, 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: Charles B. Pullen  
Name (Printed or typed)

P.O. Box 1344  
Address

Thonotosassa, FL 33592  
City, State & Zip

863-682-4838  
Daytime Telephone number

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

D. BROWN DEC 1, 4 2001

# 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:

C. Pullen, Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 1344  
Thonotosassa, FL 33592

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Business Consulting - Construction and Retail Sales

## ARTICLE IV SHARES

The number of shares of stock is:

100

## ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Charles B. Pullen  
President  
P.O. Box 1344  
Thonotosassa, FL 33592

## ARTICLE VI REGISTERED AGENT

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

Charles B. Pullen  
815 Kraft Rd.  
Lakeland, FL 33815

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Charles B. Pullen  
P.O. Box 1344  
Thonotosassa, FL 33592

\*\*\*\*\*  
*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

12-10-01  
Date

  
Signature/Incorporator

12-10-01  
Date

FILED  
01 DEC 13 AM 10:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA