## P02000 115321

Office Use Only



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SECRETARY OF STATE



## TRANSMITTAL LETTER

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

Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation an	d a check for:
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PY REQUIRED
FROM:\	eopold Beye 14841 Bolanc	LAvenue	
	Spring Hill, Gity	Address FL 34610 , State & Zip	<u></u>
	727 - 856 Daytime	-1487 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	48 47
The name of the corporation shall be:	
Leopold Beyens, Inc.	PACCE TO BE TO THE TO SEE TO BE TO SEE TO
ARTICLE II PRINCIPAL OFFICE	
The principal place of business/mailing address is:	Alice of
14841 Boland Avenue	<b>4</b>
Spring Hill, FL34610  ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Drywall Construction	
ARTICLE IV SHARES	
The number of shares of stock is:	
1000	
ARTICLE V INITIAL OFFICERS/DIRECTORS (optional) The name(s), address(es) and title(s):	
Leopold Beyens President	· <del></del>
ARTICLE VI REGISTERED AGENT  The name and Florida street address of the registered agent is:	
Leopold Beyens	
14841 Boland Avenue SpringHill, FL 34610	•
ARTICLE VII INCORPORATOR	- ·
The <u>name and address</u> of the Incorporator is:	
Leopold Beyens 14841 Boland Avenue	- '
SprnaHill, FL 34610	÷
	*******
Having been named as registered agent to accept service of process for the above stated corporate certificate, I am familiar with and accept the appointment as registered agent and agree to act in t	
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Lopoli 2 fr	10-21-02 Date
Signature/Registered Agent	Date
Lapolt Bar	1021-02
Signature/incorporator	Date