

P02000121533

(Requestor's Name)

JAXCITY INSURANCE
9943 Beach Blvd.
Jacksonville, FL 32246
(904) 998-1300

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

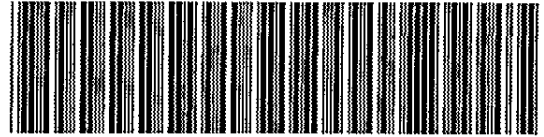
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11-14-02
23.

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:

H.O. Lathing Construction Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1209 Neck Road, Ponte Vedra Fl 32082

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Henrich Onufer, 1209 Neck Road, Ponte Vedra Beach Fl 32082
President

ARTICLE VI REGISTERED AGENT

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

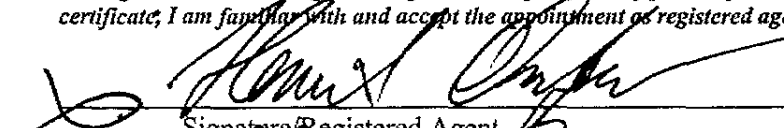
Henrich Onufer, 1209 Neck Road, Ponte Vedra Beach Fl 32082

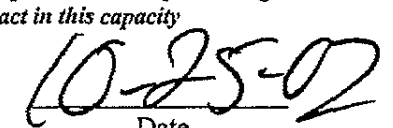
ARTICLE VII INCORPORATOR

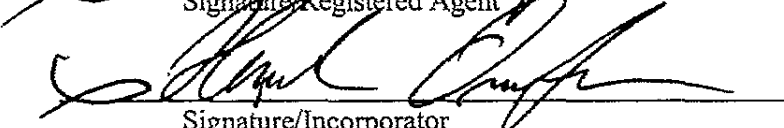
The name and address of the Incorporator is:

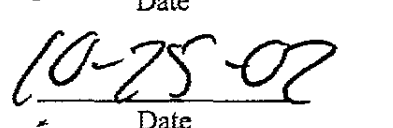
Henrich Onufer, 1209 Neck Road, Ponte Vedra Beach Fl 32082

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

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STATE
OF FLORIDA