-P03000000200

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Eddinoso Entity Famo)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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DIVISION OF CORPORATIONS

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TRANSMITTAL LETTER

Department of State Division of Corporat P. O. Box 6327	ions		
Tallahassee, FL 323	14	_	
SUBJECT: 60	lden Green Con (PROPOSED CORPORAT	struction Co. rename- <u>Mustinclu</u>	UDE SUFFIX)
Enclosed is an origina	al and one(1) copy of the article	es of incorporation and a	check for
	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM:	haleigh Choice Name (Pr	inted or typed)	
	8715 Penker	LAN C ddress	
	TA/AhASSEC, City, S	FA 323/7 State & Zip	7
	850-508-6 Daytime Te	lephone number	

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

ARTICLES OF INCORPORATION	· ====				
In compliance with Chapter 607 and/or Chapte	r 621 FS (Prof	Sit)			
•					
ARTICLE I NAME The name of the corporation shall be: Golde	· -				
The name of the corporation shall be:		1		Λ	
Outue	en Oreen	1 Cons.	fraction	(O.	
		_	-) (0. /	00.	
ARTICLE II PRINCIPAL OFFICE	<u></u>				
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address	is: 8715	D V.	1 100 7	TOLE	
The principal place of outsiness/maning address	1 64.0	revker	HAME /	141.1 14	
				<i>3</i> a.	3.
	- 			(- ,
ARTICLE III PURPOSE		11	1		
The purpose for which the corporation is organ	lized is: Du; [a New	Construction	6 Л	
	Renol	rated i	Ald Houses	0 =	
		<i>y</i>	1/00 JEJ	SECRET DIVISION C	
ARTICLE IV SHARES			- '		
The number of shares of stock is: /00				-2 For	=
				PR PR	5
ARTICLE V INITIAL OFFICERS/DIF	RECTORS (on	tional)		STA STA	
The name(s), address(es) and title(s):				RATION 1: 07	
XA/E.	gh choice	- Pre	SIDENT	- 5	
87/5/	brker bank		. <u>-</u>		
TAI. F.	IA-32317				
		~~~	ertary	(S. 4 )	
			,		
ARTICLE VI REGISTERED AGENT The name and Florida street address of the re	<u>.</u> mistered agent is		a Maria		
The name and Florida street address of the re	gistered agent is	KAleigh	Moice		
		8715 N	Thoice level	me	
				_	
4 D D C C C C C C C C C C C C C C C C C		IM. FI	4.32317		
ARTICLE VII INCORPORATOR	and the second s	11	1 01		
The <u>name and address</u> of the Incorporator is:		KAler	The Chai		
		27st	lacker !	and	
		0/13	Tal 19	0 2 22/2	
*************				*****	**
Having been named as registered agent to accept service certificate, I am familiar with and accept the appointmen				e designated in t	hi
zerigicale, i am jamalar wan ang agcept the appointmen	u us registeren agen	n ana ugree w a	ы т ты сирисиу		

Signature/Incorporator