

P03000094534

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

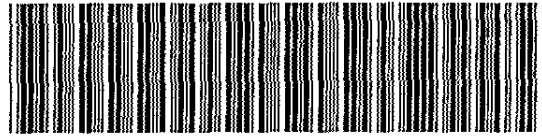
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/25/03--01065--009 **78.75

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/28/03

TRANSMITTAL LETTER

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

SUBJECT: T.L. Door & Trim Works , 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: Thomas A. Lipp

Name (Printed or typed)

11117 100th Ave North

Address

Seminole , Florida 33772

City, State & Zip

727-481-9682

Daytime 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

The name of the corporation shall be:

T.L. Door & Trim Works ,Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 4893
Seminole , Florida 33775

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Door & Trim Work

ARTICLE IV SHARES

The number of shares of stock is:

1,000 shares authorized

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Thomas A Lipp
11117 100th Ave N
Seminole, FI 33772

ARTICLE VI REGISTERED AGENT

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

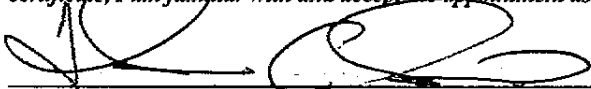
Thomas A Lipp
11117 100th Ave North
Seminole, Florida 33772

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas A Lipp
11117 100th Ave North
Seminole , Florida 33772

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

8/21/03

Date



Signature/Incorporator

8/21/03

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA