

P0300011750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

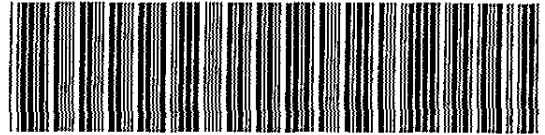
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECURITY OF STATE
TALLAHASSEE, FLORIDA

✓
10/9/03

TRANSMITTAL LETTER

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

SUBJECT: Don'z Custom Cabinetry 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: Donald C. Griffith

Name (Printed or typed)

6233 East Sawgrass Rd. #6

Address

Sarasota, Fl. 34240

City, State & Zip

941-377-6601

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:

Don't Custom Cabinetry Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8233 East Sawgrass Rd. #6

Sarasota, Fl. 34240

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Donald C. Griffith 2639 Nassau St. Sarasota, Fl. 34231 President

ARTICLE VI REGISTERED AGENT

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

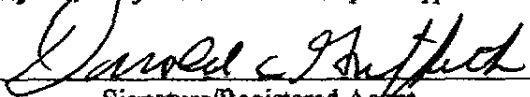
Donald C. Griffith 2639 Nassau St. Sarasota, Fl. 34231

ARTICLE VII INCORPORATOR

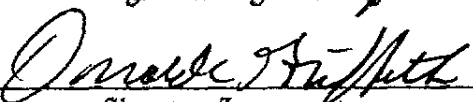
The name and address of the Incorporator is:

Donald C. Griffith 2639 Nassau St. Sarasota, Fl. 34231

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

10/3/03
Date


Signature/Incorporator

10/3/03
Date

FILED
03 OCT -6 PM 4:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA