

P03000 118045

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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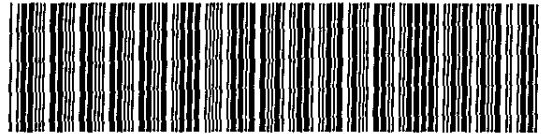
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TS
10/20/03

TRANSMITTAL LETTER

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

SUBJECT: SHAMROCK INDUSTRIES 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: KENNETH T. COX
Name (Printed or typed)

13999 ASCOT DR
Address

JACKSONVILLE, FL 32250
City, State & Zip

904-223-0751
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:

SHAMROCK INDUSTRIES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13999 ASCOT DR

JACKSONVILLE, FL. 32250

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CARPENTRY AND CABINET WORK AND INSTALLATION
CABINET SALES

ARTICLE IV SHARES

The number of shares of stock is:

300

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

KENNETH J. COX PRESIDENT/CEO

ARLENE M COX SECRETARY/TREASURER

13999 ASCOT DR

JACKSONVILLE, FL. 32250

ARTICLE VI REGISTERED AGENT

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

ARLENE M. COX

13999 ASCOT DR

JACKSONVILLE, FL. 32250

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KENNETH J. COX

13999 ASCOT DR.

JACKSONVILLE, FL. 32250

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

Arlene M. Cox

Signature/Registered Agent

Arlene M. Cox

Kenneth J. Cox

Signature/Incorporator

KENNETH J. COX

10-13-03

Date

10-13-03

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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