

P030000123999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies

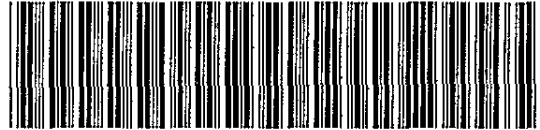


Certificates of Status



Special Instructions to Filing Officer:

Office Use Only



400024015414

10/24/03--01053--005 \*\*87.50

FILED

03 OCT 24 PM 3:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11-3-03

## TRANSMITTAL LETTER

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

SUBJECT: Cornerstone Design & Construction, 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: James G. Vose

Name (Printed or typed)

460 Coopers Cove Road

Address

St. Augustine, FL 32095

City, State & Zip

(904) 829-6890

Daytime Telephone number

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

FILED

03 OCT 24 PM 3:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF INCORPORATION**  
FOR  
**CORNERSTONE DESIGN & CONSTRUCTION, INC.**  
**FIRST: The undersigned**

**NAME ADDRESS**

James G. Vose, 460 Coopers Cove Road, St. Augustine, FL 32095  
being at least eighteen years of age, does hereby form a corporation under the laws of the State of Florida.

**SECOND:** The name of the corporation is: CORNERSTONE DESIGN & CONSTRUCTION, INC.

The corporation shall be a close corporation.

**THIRD:** The purpose of the corporation is to engage in any lawful act or activity for which a corporation may be organized under the laws and statutes of the State of Florida.

**FOURTH:** The duration of the corporation is: perpetual.

**FIFTH:** The street address of the principal office of the corporation in Florida is: 460 Coopers Cove Road, St. Augustine, FL 32095 located in the county of St. Johns.

**SIXTH:** The name of the registered agent of the corporation in Florida is: James G. Vose whose street address is 460 Coopers Cove Road, St. Augustine, FL 32095.

**SEVENTH:** The corporation has authority to issue only one class of shares of stock. The corporation has authority to issue 2,000 shares common stock at \$0.01 par value per share. All of the corporation's issued shares shall be held of record by not more than 30 persons.

**EIGHTH: Indemnification of Officers, Directors, Employees and Agents:** The corporation shall indemnify any person who incurs expenses or liabilities by reason of the fact he or she is or was an officer, director, employee or agent of the corporation or is or was serving at the request of the corporation as a director, officer, employee or agent of another corporation, partnership, joint venture, trust or other enterprise. This indemnification shall be mandatory in all circumstances in which indemnification is permitted by the laws or statutes of Florida.

**NINTH: Limitation of Liability:** To the fullest extent permitted by the laws or statutes of Florida, as the same exists or may hereafter be amended, a director of the corporation shall not be liable to the corporation or its stockholders for monetary damages for any action taken or any failure to take any action as a director. No repeal, amendment or modification of this article, whether direct or indirect, shall eliminate or reduce its effect with respect to any act or omission of a director of the corporation occurring prior to such repeal, amendment or modification.

IN WITNESS WHEREOF, I have signed these articles and acknowledge the same to be my act on this

the 21st. day of October, A.D. 2003.


**SIGNATURE OF INCORPORATOR:**

Signed: 

Printed: James G. Vose

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 OF REGISTERED AGENT:**



**PRINTED NAME OF REGISTERED AGENT:**

James G. Vose