

PO3000135743

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

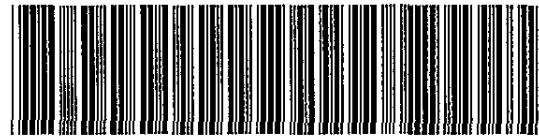
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**TRANSMITTAL LETTER**

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

**SUBJECT:** Tim Davis Plastering, 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:** Tim Davis  
Name (Printed or typed)

20701 Dickerson Rd  
Address

Fountain FL 32438  
City, State & Zip

850-722-9852  
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:

Tim Davis Plastering, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

20701 Dickerson Rd  
Fountain FL 32438

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

construction

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Tim Davis, President  
Donna Davis, Secretary  
20701 Dickerson Rd  
Fountain FL 32438

**ARTICLE VI REGISTERED AGENT**

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

Donna Davis  
20701 Dickerson Rd  
Fountain FL 32438

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Donna Davis  
20701 Dickerson Rd  
Fountain FL 32438

\*\*\*\*\*

*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

11-10-03

Date



Signature/Incorporator

11-10-03

Date

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TALLAHASSEE, FLORIDA