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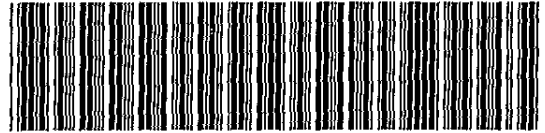
(Business Entity Name)

(Document Number)

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EFFECTIVE DATE

1-1-04

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SEC. OF STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: Williams Custom Trim & Remodeling, Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: Gary C Williams
Name (Printed or typed)

200 Ave K SE Apt. 448
Address

Winter Haven, FL 33880
City, State & Zip

863-287-2253
Daytime Telephone number

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

EFFECTIVE DATE
1-1-04

ARTICLES OF INCORPORATION

OF

Williams Custom Trim & Remodeling, Inc.
A Florida Profit Corporation

(Pursuant to Chapter 607 and/or 621, Florida Statutes)

The undersigned person has signed this document for the purpose of forming a corporation under the laws of Florida and adopts the following Articles of Incorporation.

1. **Name.** The name of this corporation is Williams Custom Trim & Remodeling, Inc..
2. **Purpose and Powers.** This corporation is organized for the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

This corporation shall have the broad general powers set forth in Chapter 607.0302, Florida Statutes, and the purpose for which this corporation is organized is:

To install custom trim and remodel commercial and residential structures.

3. **Authorized Shares.** The corporation shall have the authority to issue 1000 shares of common stock. The par value of the stock is \$ 1.00.
4. **Principal Office and Mailing Address of Corporation.** The principal place of business and mailing address of the corporation shall be:

Principal Place of Business
P O Box 1159

Daveport, Florida 33836

Mailing Address

P O Box 1159

Davenport, Florida 33836

5. **Initial Officers/Directors.** The initial Board of Directors shall consist of 1 persons, who shall serve until the first annual meeting of the shareholders, and whose names and addresses are:

Gary C Williams

200 Ave K SE Apt. 448 Winter Haven, Florida 33880

President

6. **Registered Agent.**

The name and Florida street address of the Registered Agent of the Corporation is:

Gary C Williams

200 Ave K SE Apt 448

Winter Haven, Florida 33836

7. **Incorporator.** The name and address of the incorporator is:

Gary C Williams

P O Box 1159

Davenport, Florida 33836

8. **Effective Date.** These Articles are to be effective the date of filing unless otherwise specified below:

January 1, 2004

IN WITNESS WHEREOF, the following incorporator has signed these Articles of Incorporation on:

Date: 11-14-03

Gary C Williams
Gary C Williams

ACCEPTANCE BY REGISTERED AGENT

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.

DATE: 11-14-03

Gary C Williams
Gary C Williams

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STATE
TALLAHASSEE
FLORIDA