

PO3000140732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

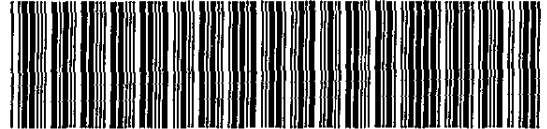
(Document Number)

Certified Copies     

Certificates of Status     

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400024721204

EFFECTIVE DATE  
1-1-04

11/19/03--01028--008 \*\*78.75

12-1-03  
B

## **Transmittal Letter**

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

**Subject: Acarpenter Incorporated**  
( Acarpenter is meant to be one word )

Enclosed are an original and one (1) copy of the articles of incorporation and a cashiers check for:

\$ 78.75  
Filing Fee  
and Certified Copy

**From: Paul Condon**  
**1815 N. A1A**  
**Flagler Beach, FL 32136**

**EFFECTIVE DATE**

**1-1-04**

# Articles of Incorporation

In compliance with chapter 607 & 621 F.S.

( A )

*name of corporation*

**Acarpenter Incorporated**

( B )

*principle place of business*

**1815 N. A1A**

**Flagler Beach, FL 32136**

( C )

*number of shares of stock*

**10**

( D )

*registered agent / office*

**Paul Condon**

**1815 N. A1A**

**Flagler Beach, FL 32136**

( E )

*incorporator*

**Paul Condon**

**1815 N. A1A**

**Flagler Beach, FL 32136**

( F )

*effective date*

**01 / 01 / 04**

.....  
Having been named as registered agent to accept service 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.



\_\_\_\_\_  
registered agent

11/9/03

\_\_\_\_\_  
date



\_\_\_\_\_  
incorporator

11/9/03

\_\_\_\_\_  
date