

P03000145617

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

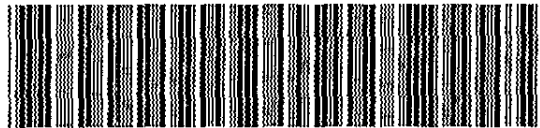
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Charukal Clements GAVE
AUTHORIZATION BY PHONE TO
CORRECT R/S Address
DATE 12/15/03
DOC. EXAM Don't Brown

TRANSMITTAL LETTER

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

SUBJECT: Clemons Fence 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: Chadwick D. Clemons
Name (Printed or typed)

P.O. Box 871
Address

Starke FL 32091
City, State & Zip

Cell (352)-235-1437 Home (352) 468-3288
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:

Clemons Fence Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 871
Stake, Fl. 32091

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Fence Installation

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Chadwick D. Clemons
P.O. Box 871
Stark, Fl. 32091

ARTICLE VI REGISTERED AGENT

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

Chadwick D. Clemons
10433 Hampton Ave.
Hampton, FL 32094

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Chadwick D. Clemons
P.O. Box 871
Stake, Fl. 32091

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

Chadwick D. Clemons

Signature/Registered Agent

11-21-2003

Date

Chadwick D. Clemons

Signature/Incorporator

11-21-2003

Date

Chadwick D. Clemons

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA