

P03000 145861

(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



800024990388

12/01/03--01023--004 **78.75

EFFECTIVE DATE
01/01/2004

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 DEC -1 AM 10:20

FILED

TRANSMITTAL LETTER

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

SUBJECT: ALL CARPENTRY Services 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: Colley Financial Services Inc
Name (Printed or typed)

209 Ws 27 S
Address

LAKE PLACID FL 33852
City, State & Zip

863-465-6473
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:

ALL CARPENTRY SERVICES INC

FILED

03 DEC -1 AM 10:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

24 Oak Street
LAKE PLACID FL 33852

EFFECTIVE DATE
01/01/2004

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction- CARPENTRY

Article VIII

ARTICLE IV SHARES

The number of shares of stock is: 100

EFFECTIVE
Date

January 1, 2004

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Brian K LIPFORD - President

WANDA F LIPFORD - Secretary, Treasurer

ARTICLE VI REGISTERED AGENT

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

Colley Financial Services Inc
209 US 27 S
LAKE PLACID FL 33852

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Colley Financial Services Inc
209 US 27 S
LAKE PLACID FL 33852

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

Thomas A. Colley
Signature/Registered Agent

11-25-03
Date

Thomas A. Colley
Signature/Incorporator

11-25-03
Date