

P03000153408

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

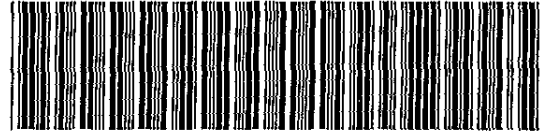
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Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: \_\_\_\_\_

Sterjo Construction, 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: \_\_\_\_\_

Joseph A. Thompson

Name (Printed or typed)

514 NE 40th Avenue

Address

Ocala, FL 34470

City, State & Zip

352-620-9218

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:

Sterjo Construction, Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

514 NE 40th Avenue  
Ocala, FL 34470

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Certified General Contractor Business (construction)

**ARTICLE IV SHARES**

The number of shares of stock is:

The aggregate number of shares which this corporation shall have authority to issue and have outstanding at any time shall be 1,000. shares fo common stock of par value or none.

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

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

President: Joseph A. Thompson  
514 NE 40th Avenue  
Ocala, FL 34470

Director: Joseph A. Thompson  
514 NE 40th Avenue  
Ocala, FL 34470

**ARTICLE VI REGISTERED AGENT**

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

Joseph A Thompson  
514 NE 40th Avenue  
Ocala, FL 34470

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

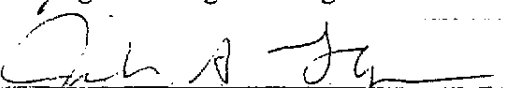
Joseph A Thomspson  
514 NE 40th Avenue  
Ocala, FL 34470

\*\*\*\*\*

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

12-09-03  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

12-09-03  
\_\_\_\_\_  
Date

FILED  
03 DEC 11 PM 6:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA