

P04000003437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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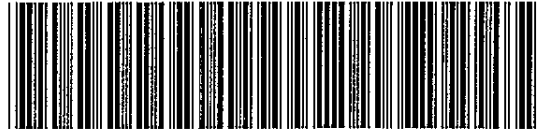
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12/24/03--01080--005 **78.75

03 DEC 24 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

LAW OFFICES
DARRYL J. TOMPKINS, P.A.
P. O. BOX 519
14706 MAIN STREET
ALACHUA, FLORIDA 32616

DARRYL J. TOMPKINS
FLORIDA BAR BOARD CERTIFIED
REAL ESTATE LAWYER

TELEPHONE (386) 418-1000
FACSIMILE (386) 418-1079
EMAIL: DJTompkins@aol.com

December 23, 2003

Secretary of State
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

Re: ALACHUA DRAIN SERVICES, INC.


To Whom It May Concern:

We are enclosing herewith the original and one copy of the Articles of Incorporation for Alachua Drain Services, Inc. Also enclosed is our check #4311 in the amount of \$78.75, which represents the following charges:

\$ 35.00	Filing Fee
8.75	Certified Copy of Articles
<u>35.00</u>	Registered Agent Fee
\$ 78.75	

Please return a certified copy of the articles to me in the enclosed self-addressed stamped envelope. If you have any questions concerning the foregoing, please do not hesitate to contact me.

Very truly yours,


Darryl J. Tompkins

DJT/mp
Enclosure

TRANSMITTAL LETTER

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

SUBJECT: ALACHUA DRAIN 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☒ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Darryl J. Tompkins, P.A.

Name (Printed or typed)

P O Box 519

Address

Alachua, Florida 32616

City, State & Zip

386.418.1000

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:
ALACHUA DRAIN SERVICES, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:
6708 West County Road 235
LaCrosse, Florida 32658
Mailing: P O Box 997
Alachua, FL 32616

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Personal Service Corporation

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):

Harold T. Davis, President	Clayton T. Davis, Vice President
P O Box 997	12303 NW 147th Lane
Alachua, FL 32616	Alachua, FL 32615

Randall W. Davis, Secretary/Treasurer
6708 West County Road 235
LaCrosse, FL 32658

ARTICLE VI REGISTERED AGENT

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

Harold T. Davis
6708 West County Road 235
LaCrosse, FL 32658

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Harold T. Davis
P O Box 997
Alachua, FL 32616

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

Harold T. Davis

Signature/Registered Agent HAROLD T. DAVIS

12-15-03

Date

Harold T. Davis

Signature/Incorporator HAROLD T. DAVIS

12-15-03

Date