

PO4000005928

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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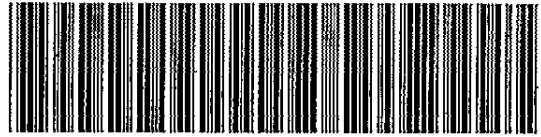
(Business Entity Name)

(Document Number)

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TRANSMITTAL LETTER

2003 DEC 30 PM 4:35

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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

SUBJECT: RALPH D. NEAL INSTALLATION & REPAIR, INC.  
(proposed corporate name)

Enclosed please find an original and one <sup>2</sup> (1) copy of the articles of incorporation for the  
above corporation and check in the amount of \$ ~~125.00~~  
\$ 78.75 cent/copy too.

FROM:

MS. ROSEMARIE JACQUES  
Name

P.O. BOX 3275  
Address

BELLEVIEW, FL. 34421  
City, State, & Zip

( 352 ) 307-9589  
Telephone Number

Note: Additional copy of articles is needed only when certified copy is requested.

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ARTICLES OF INCORPORATION

2003 DEC 30 PM 4:35

OF

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

RALPH D. NEAL INSTALLATION & REPAIR, INC.

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

RALPH D. NEAL INSTALLATION & REPAIR, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

8 PINE TRACE OCALA, FLORIDA 34472

MAILING ADDRESS: 8 PINE TRACE OCALA, FLORIDA 34472

ARTICLE III CAPITAL STOCK

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 SHARES OF STOCK

ARTICLE IV INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is:

RALPH D. NEAL 8 PINE TRACE OCALA, FL. 34472

BUSINESS PHONE # IS: (352) 687-3378

**ARTICLE V INCORPORATOR(S)**

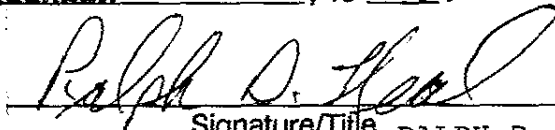
The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

RALPH D. NEAL 8 PINE TRACE OCALA, FLORIDA 34472

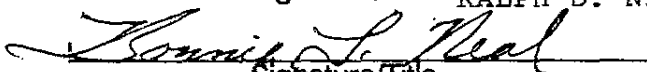
BONNIE L. NEAL 8 PINE TRACE OCALA, FLORIDA 34472

The undersigned has(have) executed these Articles of Incorporation this

27TH day of DECEMBER, 2003.



Signature/Title RALPH D. NEAL--P/T



Signature/Title BONNIE L. NEAL--VP/S

\_\_\_\_\_  
Signature/Title

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**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE**

2003 DEC 30 PM 4:35

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the corporation is: RALPH D. NEAL INSTALLATION & REPAIR, INC.

2. The name and address of the registered agent and office is:

RALPH D. NEAL  
(NAME)

8 PINE TRACE  
(P.O. BOX NOT ACCEPTABLE)

OCALA, FLORIDA 34472  
(CITY/STATE/ZIP)

SIGNATURE

Bonnie L. Neal  
(corporate officer) BONNIE L. NEAL

TITLE

VP/SEC.

DATE

DECEMBER 27, 2003

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

Ralph D. Neal

RALPH D. NEAL

DATE

DECEMBER 27, 2003