

P04000023393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

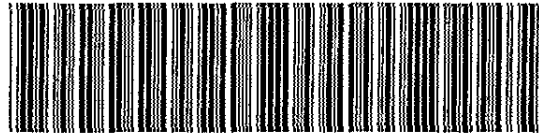
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 28 PM 1:14

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TRANSMITTAL LETTER

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

SUBJECT: NATHAN BACON 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: NATHAN BACON
Name (Printed or typed)

2452 SHAMROCK DR
Address

PORT ORANGE, FL 32118
City, State & Zip

386-547-1635
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:

NATHAN BACON CONSTRUCTION INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

2452 SHAMROCK DR
PORT ORANGE, FL 32118

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONSTRUCTION

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

NATHAN BACON PSYD
2452 SHAMROCK DR
PORT ORANGE, FL 32118

ARTICLE VI REGISTERED AGENT

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

NATHAN BACON
2452 SHAMROCK DR
PORT ORANGE, FL 32118

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NATHAN BACON
2452 SHAMROCK DR
PORT ORANGE, FL 32118

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

1-24-07 NB

Date



Signature/Incorporator

1-24-07 NB

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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