

P04000030213

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

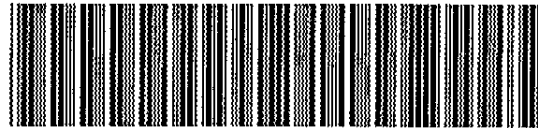
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Certified Copies _____ Certificates of Status _____

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2004 FEB -9 A 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

TRANSMITTAL LETTER

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

SUBJECT: R. J. PAYNTER PAINTING 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: ROBERT J. PAYNTER
Name (Printed or typed)

7139 ELIZABETH AVE.
Address

HUDSON, FL. 34667
City, State & Zip

727.868.0400
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:

R. J. PAYNTER PRINTING INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

*7139 ELIZABETH AVE.
HUDSON, FL 34667*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LAWFUL PURPOSE IN THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES OF COMMON STOCK WITH \$1 PAR VALUE per SHARE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

*ROBERT J. PAYNTER
7139 ELIZABETH AVE.
HUDSON, FL 34667*

ARTICLE VI REGISTERED AGENT

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

*ROBERT J. PAYNTER
7139 ELIZABETH AVE
HUDSON, FL 34667*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*ROBERT J. PAYNTER
7139 ELIZABETH AVE
HUDSON, FL 34667*

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]

Signature/Registered Agent

2.6.04

Date

[Signature]

Signature/Incorporator

2.6.04

Date

FILED
2009 FEB -9 A 10:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA