

P04000038679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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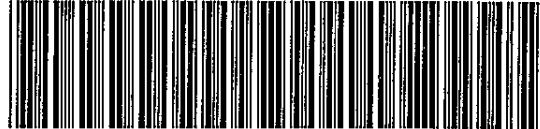
(Business Entity Name)

(Document Number)

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02/06/04--01066--004 **78.75

FILED
04 MAR -1 AM 10:40
RECEIVED
FALLS CHURCH, VA

T. Lewis 3/2/04

TRANSMITTAL LETTER

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

SUBJECT: WILLIAMS CARPENTRY, 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: JC HUDSON
Name (Printed or typed)

485 N. VOLUSIA AVENUE
Address

ORANGE CITY, FLORIDA 32763
City, State & Zip

376.774.8100
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

February 14, 2004

JC HUDSON
485 N. VOLUSIA AVENUE
ORANGE CITY, FL 32763

SUBJECT: WILLIAMS CARPENTRY, INC
Ref. Number: W04000006332

We have received your document for WILLIAMS CARPENTRY, INC and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 704A00010249

RECEIVED
04 MAR - 1 AM 7:51
DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

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

SUBJECT: WILLIAM WILLIAMS CARPENTRY, 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: JC HUDSON
Name (Printed or typed)

485 N. VOLUSIA AVENUE
Address

ORANGE CITY, FLORIDA 32763
City, State & Zip

376.774.8100
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:

WILLIAM WILLIAMS CARPENTRY, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

824 COLEMAN AVENUE, DELTONA, FLORIDA 32725

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

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):

WILLIAM WILLIAMS P,V,S,T

ARTICLE VI REGISTERED AGENT

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

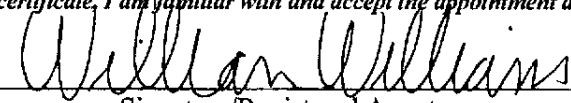
WILLIAM WILLIAMS 824 COLEMAN AVENUE, DELTONA, FLORIDA 32725

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM WILLIAMS 824 COLEMAN AVENUE, DELTONA, FLORIDA 32725

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

JAN. 4, 2004

Date



Signature/Incorporator

JAN. 4, 2004

Date

FILED
04 MAR -1 AM 10:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA