

P04000052808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☒

WAIT

☐

MAIL

(Business Entity Name)

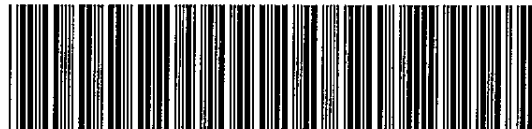
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STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

✓

9/2/21

TRANSMITTAL LETTER

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

SUBJECT: HOME CUSTOM CLASSICS INCORPORATED
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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:

SHAWN R. FREELAND
Name (Printed or typed)

1505 W. THARPE STREET APT 434
Address

TALLAHASSEE, FL 32304
City, State & Zip

850-251-1590
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:

HOME CUSTOM CLASSICS INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1505 WEST THARPE ST. APT. 434
TAL. FL, 32304

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONDUCT BUSINESS AND EARN PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

C.E.O./PRESIDENT
SHAWN ROBERT FREELAND
1505 W. THARPE ST. APT. 434
TALLAHASSEE, FL 32304

ARTICLE VI REGISTERED AGENT

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

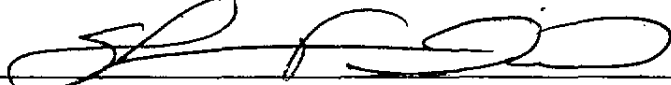
SHAWN R. FREELAND
1505 W. THARPE ST. APT. 434
TALLAHASSEE FL 32304

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

SHAWN R. FREELAND
1505 W. THARPE ST. APT. 434
TALL, FL 32304

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

3/26/04
Date


Signature/Incorporator

3/24/04
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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