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(Requestor's Name)

(Address)

(Address)

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TRANSMITTAL LETTER

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

SUBJECT: BILL'S CABINET TREE 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 ☒ \$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: WILLIAM B. SCHARES
Name (Printed or typed)

1407 CHILEAN LANE
Address

WINTER PARK FL 32792
City, State & Zip

321-239-9193
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:

Bill's Cabinet Tree Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

William B Schares
1407 Chilean Lane
Winter Park, Fl. 32792
President

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Cabinet Sales

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

William B Schares
1407 Chilean Lane
Winter Park, Fl. 32792
President

ARTICLE VI REGISTERED AGENT

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

William B. Schares
1407 Chilean Lane
Winter Park, Fl. 32792

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William B. Schares
1407 Chilean Lane
Winter Park, Fl. 32792

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
William B. Schares

3-26-04

Date



Signature/Incorporator

William B. Schares

3-26-04

Date