

PD4000057769

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

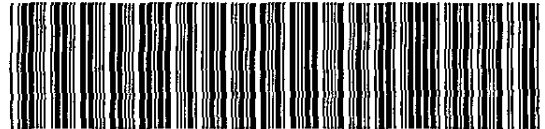
(Business Entity Name)

(Document Number)

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04 MAR 29 AM 8:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

SUBJECT: JAMES HOWARD, 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: JAMES HOWARD  
Name (Printed or typed)

1231 GROVE ST.  
Address

APOPKA FL 32703  
City, State & Zip

407 886 4743  
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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

James Howard, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1231 Grove St.  
APOPKA, FL 32703

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Cabinet Installation

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

James Howard  
1231 Grove St  
APOPKA FL 32703

**ARTICLE VI REGISTERED AGENT**

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

James Howard  
1231 Grove St.  
APOPKA FL 32703

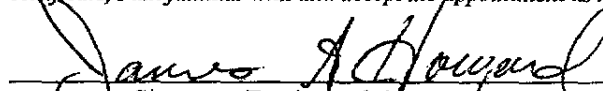
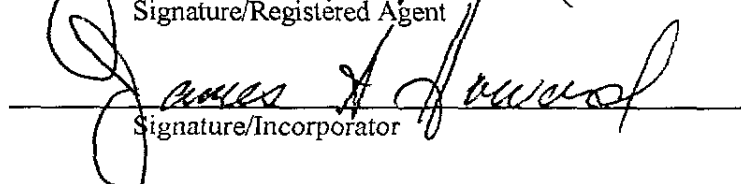
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

James Howard  
1231 Grove St.  
APOPKA, FL 32703

\*\*\*\*\*

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  
  
\_\_\_\_\_  
Signature/Incorporator

3-26-04  
\_\_\_\_\_  
Date

3-26-04  
\_\_\_\_\_  
Date