

P04000059825

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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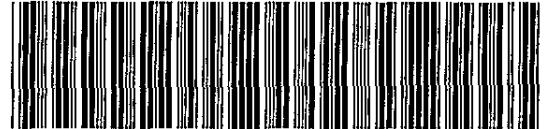
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 APR -5 PM 4:15

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TRANSMITTAL LETTER

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

SUBJECT: Ronnie Wells Carpet Installation, 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: Ronnie Wells
Name (Printed or typed)

2270 E. Annapolis Dr.
Address

Deltona Fl. 32725
City, State & Zip

386-789-3565
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: *Ronnie Wells Carpet Installation, INC.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *2270 E. Annapolis Dr.
Deltona Fl. 32725*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *To make a Living*

ARTICLE IV SHARES

The number of shares of stock is: *ONE*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Ronnie Wells
2270 E. Annapolis Dr
Deltona Fl. 32725*

ARTICLE VI REGISTERED AGENT

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

*Ronnie Wells
2270 E. Annapolis Dr.
Deltona Fl.*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Ronnie Wells
2270 E. Annapolis Dr.
Deltona Fl. 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

Ronnie Wells

Signature/Registered Agent

3/29/04

Date

Ronnie Wells

Signature/Incorporator

3/29/04

Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA