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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-12-04

TRANSMITTAL LETTER

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

SUBJECT: Arnold Inc.

(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
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:

Michael Hudson Arnold
Name (Printed or typed)

648 Taylorsville Ct.
Address

St. Aug. FL. 32095
City, State & Zip

(904) 810-7685
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:

ARNOLD INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

648 Intercoastal Circle
ST. AUGUSTINE FL. 32095

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

EDUCATOR + PERSONAL SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

500 @ 1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

MICHAEL H. ARNOLD CEO

KIRSTEN M. ARNOLD CFO

ARTICLE VI REGISTERED AGENT

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

FRANKLIN D. DEESE
725 LAKE GENEVA DR.
ST. AUGUSTINE FL. 32092

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHAEL H. ARNOLD
648 Intercoastal Circle
ST. AUGUSTINE FL. 32095

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

X Franklin D. Deese
Signature/Registered Agent

3/30/2004
Date

X Michael H. Arnold
Signature/Incorporator

3/30/2004
Date

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TALLAHASSEE, FLORIDA