

P04000066574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

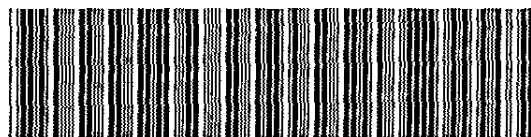
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 APR 19 P. 12:58

FILED

TRANSMITTAL LETTER

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

SUBJECT: Greg Reams Home Repair, 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: Gregory L. Reams

Name (Printed or typed)

1591 Lemonwood Rd

Address

Jacksonville, FL 32259

City, State & Zip

904-287-9028

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:

Greg Reams Home Repair, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1591 Lemonwood Rd.
Jacksonville, FL 32259

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Home repair and remodeling

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Gregory L. Reams, President

ARTICLE VI REGISTERED AGENT

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

Louis David, CPA
12627 San Jose Blvd. #306
Jacksonville, FL 32223

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Gregory L. Reams
1591 Lemonwood Rd
Jacksonville, FL 32259

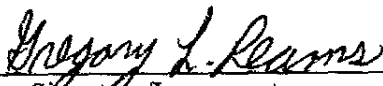
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4-14-04

Date



Signature/Incorporator

4-14-04

Date

FILED
2004 APR 19 P 2:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA