

PO 4000068861

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

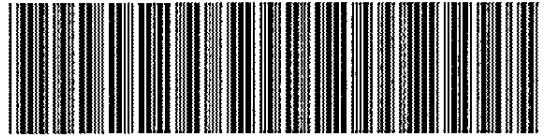
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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404-27

## TRANSMITTAL LETTER

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

SUBJECT: BILL DWYER'S CARPENTRY 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: BILL DWYER

Name (Printed or typed)

603 HIGHVIEW TERRACE NORTH

Address

BRANDON, FLORIDA 33510

City, State & Zip

813-215-9965

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 DWYER'S CARPENTRY INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

603 HIGHVIEW TERRACE NORTH  
BRANDON, FL 33510

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY LAWFUL BUSINESS UNDER FLORIDA LAWS. SPECIFICALLY SPECIALIZING IN CARPENTRY SERVICES.

**ARTICLE IV SHARES**

The number of shares of stock is:

100 PAR VALUE \$1.00

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

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

BILL DWYER, PRESIDENT  
603 HIGHVIEW TERRACE NORTH  
BRANDON, FL 33510

**ARTICLE VI REGISTERED AGENT**

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

BILL DWYER  
603 HIGHVIEW TERRACE NORTH  
BRANDON, FL 33510

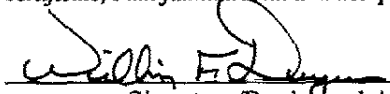
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

SAME

\*\*\*\*\*

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

4/16/04  
\_\_\_\_\_  
Date

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

4/16/04  
\_\_\_\_\_  
Date

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