

P04908072456

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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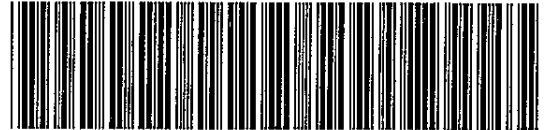
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2004 APR 30 P 3:36
REGISTRATION STATE
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5-4-04

TRANSMITTAL LETTER

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

SUBJECT: PIFER DRYWALL APPLICATIONS, 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: JAMES L. PIFER, JR.

Name (Printed or typed)

3462 SANDY OAK RD

Address

MIDDLEBURG, FL 32068

City, State & Zip

904-282-4741

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:

PIFER DRYWALL APPLICATORS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3462 SANDY OAK RD
MIDDLEBURG FL 32068

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

COMPLETE DRYWALL SERVICES, INCLUDING INSTALLATION AND REPAIR

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JAMES L. PIFER, JR. / PRESIDENT
3462 SANDY OAK RD
MIDDLEBURG FL 32068

ARTICLE VI REGISTERED AGENT

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

JOE D. JEFFERSON
7313 AMANDAS CROSSING DR S
JACKSONVILLE FL 32244-6172

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

3462 SANDY OAK RD
MIDDLEBURG FL 32068

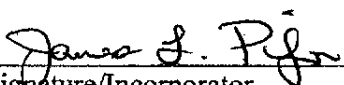
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4/5/04

Date



Signature/Incorporator

4-5-04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA