

P04000086194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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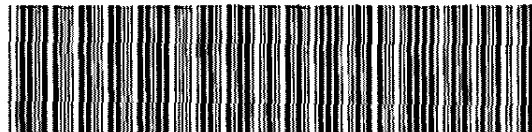
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATION

04 JUN -2 PM 1:19

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STATE
TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

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

SUBJECT: Capital Utility 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: ~~Capital Utility INC.~~ Jacqueline Courtney Oliver
Name (Printed or typed)

13 Marie Circle
Address

Crawfordville, FL 32327
City, State & Zip

(850) 926-1569
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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: Capital Utility, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

13 Marie Circle
Crawfordville, FL 32327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Utility design + permitting

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):

Jacqueline Courtney Oliver - President
13 Marie Circle Crawfordville, FL 32327

ARTICLE VI REGISTERED AGENT

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

Jacqueline Courtney Oliver
13 Marie Circle Crawfordville, FL 32327

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jacqueline Courtney Oliver
13 Marie Circle Crawfordville, FL 32327

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

Jacqueline C Oliver
Signature/Registered Agent

6/2/04
Date

Jacqueline C Oliver
Signature/Incorporator

6/2/04
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA