

PO4000098278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

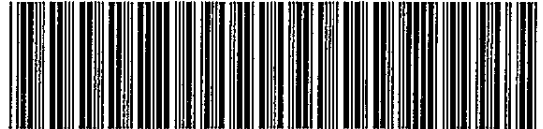
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000038252540

06/28/04--01009--018 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN 28 PM 2:13

TRANSMITTAL LETTER

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

SUBJECT:

Joanne D. Connell, 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:

Joanne D. Connell

Name (Printed or typed)

861 Faulkwood Ct.

Address

Sarasota, FL 34232

City, State & Zip

941 377-7035

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:

Joanne D. Connell, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

861 Faulkwood Ct.
Sarasota, FL 34232

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

ARTICLE VI REGISTERED AGENT

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

Joanne D. Connell
861 Faulkwood Ct.
Sarasota, FL 34232

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joanne D. Connell
861 Faulkwood Ct.
Sarasota, FL 34232

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JUN 28 PM 2:13

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

Joanne D. Connell

Signature/Registered Agent

6/24/04

Date

Joanne D. Connell

Signature/Incorporator

6/24/04

Date