

PD4000 107246

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

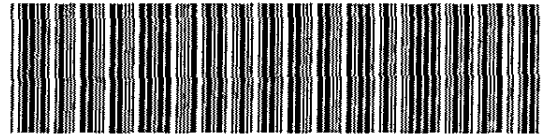
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7/20/04

TRANSMITTAL LETTER

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

SUBJECT: CARRICO'S WATER DEPOT 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: Michael James Cochran
Name (Printed or typed)

3637 Wilderness Blvd. W.
Address

PARRISH, FL 34219
City, State & Zip

941-776-9671
Daytime Telephone number

Michael Cochran GAVE
AUTHORIZATION BY PHONE TO
CORRECT Article VI
DATE 7/20/04
DOC. EXAM VR

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: *CARRICO'S WATER DEPOT INC.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *3637 wilderness Blvd. w.
PARRISH, FL 34219*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *STARTING A NEW BUSINESS*

ARTICLE IV SHARES

The number of shares of stock is: *1*

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Michael Jonas Cochran president
3637 wilderness Blvd. w.
PARRISH, FL 34219*

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

*Michael J. Cochran
3637 wilderness Blvd. w.
PARRISH, FL 34219*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*Michael J. Cochran
3637 wilderness Blvd. w.
PARRISH, FL 34219*

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

Michael J. Cochran

Signature/Registered Agent

7-15-04

Date

Michael J. Cochran

Signature/Incorporator

7-15-04

Date

FILED
JUL 19 PM 4:42
TALLAHASSEE, FLORIDA