

PO4000114705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

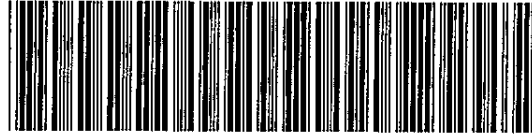
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03/05/04--01006--001 **70.00

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24 AUG -5 PM 3:43
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

TS 8/5/04

TRANSMITTAL LETTER

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

SUBJECT: Home Doctor Enterprise, 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: Home Doctor Enterprise, Inc
Name (Printed or typed)

3021 Settlers Trail
Address

Saint Cloud, FL 34772
City, State & Zip

407-892-9239
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:

Home Doctor Enterprise, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3021 Settlers Trail
St. Cloud, FL 34772

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Conduct home repair and improvements, for profit

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):

Charles B Jenkins, President
Secretary
Treasurer

ARTICLE VI REGISTERED AGENT

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

Charles B Jenkins
3021 Settlers Trail
Saint Cloud, FL 34772

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Charles B Jenkins
3021 Settlers Trail
Saint Cloud, FL 34772

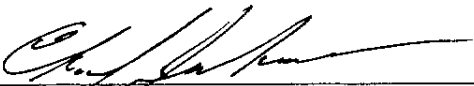
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

7/30/09

Date



Signature/Incorporator

7/30/09

Date

CLERK OF STATE
TALLAHASSEE, FLORIDA
07/10/09 5 PM 3:42