

PO4000 116897

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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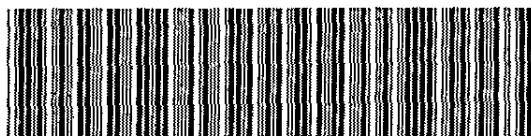
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

58/104

TRANSMITTAL LETTER

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

SUBJECT: Stephen A. Parsons 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: Stephen A. Parsons
Name (Printed or typed)

1153 Sanderlin Ave.
Address

Orlando, FL, 32825
City, State & Zip

407-658-1807
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:

Stephen A. Parsons Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1153 Sanderlin Ave.
Orlando, FL. 32825

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Trim Carpentry

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Stephen A. Parsons President

ARTICLE VI REGISTERED AGENT

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

Stephen A. Parsons

1153 Sanderlin Ave. Orlando, FL. 32825

ARTICLE VII INCORPORATOR

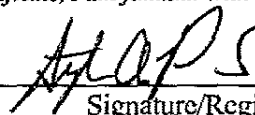
The name and address of the Incorporator is:

Stephen A. Parsons

1153 Sanderlin Ave.

Orlando, FL. 32825

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

8/8/04

Date



Signature/Incorporator

8/8/04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA