

P04000123867

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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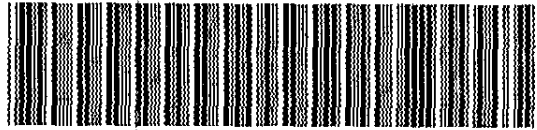
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NR/26/04--01022--009 **78.75

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 AUG 26 11:11:55

TRANSMITTAL LETTER

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

SUBJECT: Clear Tones Cable Connections 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: Samuel Williams
Name (Printed or typed)
309 North 8th Street
Address
Dundee FL 33838
City, State & Zip
843-439-0013
Daytime Telephone number

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 AUG 26 AM 11:55

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:

Clear Tones Cable Connections Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

309 North 8th Street
Dundee FL 33838

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

(laying) underground cable contracting

ARTICLE IV SHARES

The number of shares of stock is:

1 of 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Samuel Williams, owner/operator
309 North 8th Street
Dundee FL 33838

Darlene Williams, registered agent,
222 Rod Lane Secretary
Davenport FL 33837

ARTICLE VI REGISTERED AGENT

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

Darlene Williams
222 Rod Lane
Davenport FL 33837

Mailing address: 309 North 8th Street
Dundee FL 33838

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Samuel Williams
309 North 8th Street
Dundee FL 33838

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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

Darlene Williams
Signature/Registered Agent

8-11-2004
Date

Samuel Williams
Signature/Incorporator

8-11-2004
Date