

P04000126462

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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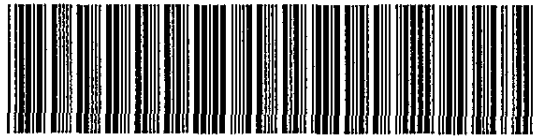
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

✓

8/9/2

## TRANSMITTAL LETTER

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

**SUBJECT:** Clay County Plumbing Supply, 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    ☒ \$78.75  
Filing Fee    Filing Fee  
                  & Certificate of Status

☐ \$78.75    ☐ \$87.50  
Filing Fee    Filing Fee,  
& Certified Copy    Certified Copy  
                                  & Certificate of  
                                  Status

**ADDITIONAL COPY REQUIRED**

**FROM:** Accounting Management

Name (Printed or typed)

117 Centre St., Suite 3

Address

Fernandina Beach, FL 32034

City, State & Zip

904-556-2194

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:

Clay County Plumbing Supply, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:  
1268 Blanding Blvd., Orange Park, FL 32065

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Wholesale and retail sale of plumbing supplies, electrical equipment  
such as portable generators, and associated hardware.

### **ARTICLE IV SHARES**

The number of shares of stock is:  
2,000

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

James K. Pelky, 449 Arthur Moore Dr., Green Cove Springs, FL 32043, President  
Laurie Pelky, 449 Arthur Moore Dr., Green Cove Springs, FL 32043, Secretary/Treasurer

### **ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:  
Fred Stepanek, 117 Centre St., Suite 3, Fernandina Beach, FL 32034

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:  
Accounting Management, 117 Centre St., Suite 3, Fernandina Beach, FL 32034

\*\*\*\*\*

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

Fredwin S. Stepanek  
Signature/Registered Agent

8-24-04  
Date

Fredwin S. Stepanek  
Signature/Incorporator

8-24-04  
Date

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04 AUG 30 AM 11:06  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA