

PO4000137878

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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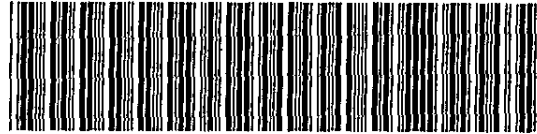
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/05/04--01010--006 **78.75

2004 OCT -5 PM 12:09
ALLAHASSEE FLORIDA

10/5/04

TRANSMITTAL LETTER

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

2004 OCT -5 PM 12:09
DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

SUBJECT: EVERGLADES SERVICES, 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: Joel A Shor, CPA

Name (Printed or typed)

16130 Rio Del Paz

Address

Delray Beach, FL 33446

City, State & Zip

561.499.3500

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:

EVERGLADES SERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1939 LEE STREET
HOLLYWOOD, FL 33020

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES AND MARKETING

ARTICLE IV SHARES

The number of shares of stock is:

5000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

THOMAS F. KAVAN II, PRESIDENT
1939 LEE STREET
HOLLYWOOD, FL 33020

ARTICLE VI REGISTERED AGENT

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

THOMAS F. KAVAN II
1939 LEE STREET
HOLLYWOOD, FL 33020

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

THOMAS F. KAVAN II
1939 LEE STREET
HOLLYWOOD, FL 33020

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

Signature/Incorporator

9.30.04

Date

9.30.04

Date

2004 OCT -5 PM 12:09
CLERK OF STATE
TALLAHASSEE FLORIDA