

704000139813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

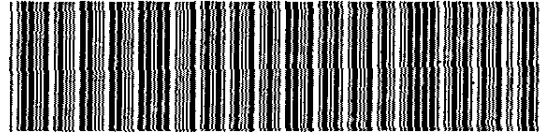
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04 OCT -8 PM 2:08
CLERK OF STATE
TALLAHASSEE, FLORIDA

704-29917

TRANSMITTAL LETTER

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

SUBJECT: HOME-SPEC CO.
(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: Steven Scofield
Name (Printed or typed)

1329 Ashby Circle
Address

Apopka, FL 32703
City, State & Zip

(407) 884-5550
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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-SPEC CO.~~

Braxton Home Inspection Co.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1329 Ashby Circle

Apopka, FL 32703

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Certified Home Inspection

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):

Steven Scofield

1329 Abby Circle

President

Apopka, FL 32703

ARTICLE VI REGISTERED AGENT

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

Steven Scofield

1329 Ashby Circle

Apopka, FL 32703

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Steven Scofield

1329 Abby Circle

Apopka, FL 32703

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

8/2/4
Date

Signature/Incorporator

8/2/4
Date

FILED
04 OCT -8 PM 2:08
CLERK OF STATE
TALLAHASSEE, FLORIDA