

P04000/52640

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

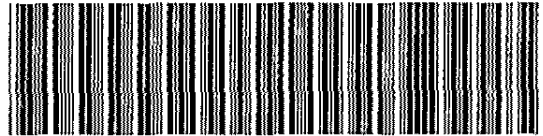
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
-601 AND 602 CPM

✓

11/8

TRANSMITTAL LETTER

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

SUBJECT: Pentacle Plumbing Company

(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: John F. Rodriguez

Name (Printed or typed)

6402 Beaver Way

Address

Tampa, Florida 33625

City, State & Zip

813-927-7483

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:

Pentacle Plumbing Company

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5907 Johns Rd,
Tampa Florida 33634

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Provide residential and commercial services

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):

John F. Rodriguez
6402 Beaver Way
Tampa, Florida 33625
President

ARTICLE VI REGISTERED AGENT

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

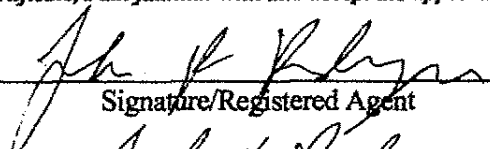
John F. Rodriguez
6402 Beaver Way
Tampa, Florida 33625

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John F. Rodriguez
6402 Beaver Way
Tampa, Florida 33625

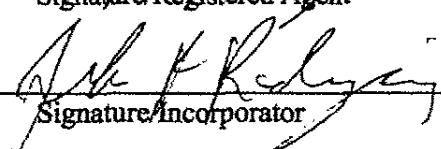
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

11/1/04

Date



Signature/Incorporator

11/1/04

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA