## P04000160260

(Req	uestor's Name)	
(Addi	ress)	
(Addi	ress)	
(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Doct	ument Number)	···
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	-

Office Use Only



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SECREDATY OF STATE

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## TRANSMITTAL LETTER

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

SUBJECT: Tr	NOTHY R SPAI	Y INC.	
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	cles of incorporation and	a check for:
\$70.00 Filing Fee		\$78.75 Filing Fee & Certified Copy	-
		ADDITIONAL CO	Status PPY REQUIRED
FPOM:	TIMOTHY R SI	PA IN	
TROWL	Name	(Printed or typed)	
,	3104 TRE	R FROG LN.	
•	A	Address	
	DE LAND FL	8RIDA 32721 State & Zip	
-	3.56 - 878 - 5 Daytime Te	463	

NOTE: Please provide the original and one copy of the articles.



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

November 5, 2004

TIMOTHY R SPAIN 3104 TREE FROG LANE DELAND, FL 32724

SUBJECT: TIMOTHY R SPAIN - PRESIDENT

Ref. Number: W04000040763

We have received your document for TIMOTHY R SPAIN - PRESIDENT and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with an address and telephone number where you can be reached during working hours.

You have to list the name of your corporation in article 1.

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

An effective date <u>may</u> be added to the Articles of Incorporation <u>if a 2005 date is needed</u>, otherwise the date of receipt will be the file date. <u>A separate article must be added to the Articles of Incorporation for the effective date.</u>

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Document Specialist New Filings Section

Letter Number: 304A00063621

In compliance with Chapter 607 and/or Chapter 621, F.S. (	Profit)			
ARTICLE I NAME	O COALN	INC		
The name of the corporation shall be: //moTHY	< 3FAM	, , ,		
ARTICLE II PRINCIPAL OFFICE				
The principal place of business/mailing address is:			As o	
3104 TREE FROS LANE				
DELAND FLORIDA 32724			04 NOV 29 PM I2: 08 SECRETALLY OF STATE TALLAHASSEF FLORIDA	<b>₽</b>
ARTICLE III PURPOSE			% SS ≥ SS	· Vitage of St.
The purpose for which the corporation is organized is:				,.
SUBCONTRACTOR (CONSTRUCTION)			그 프	, spens
(Constitution)			0R2 C	,
ARTICLE IV SHARES			SH 99	
The number of shares of stock is:				
100				
ARTICLE V INITIAL OFFICERS AND/OR DIR	<u>ECTORS</u>			
List name(s), address(es) and specific title(s):	Timothy	STAIN	- Pres	DENT
LIAM EWEENRY - VICE PRESIDENT.	110 0 (12-7			
DENISE SPAID - DIRECTOR				
PAUL JOHNSON - TREASGER				
ARTICLE VI REGISTERED AGENT				
The name and Florida street address (P.O. Box NOT acce	ptable) of the regis	tered agent is:	, ,	
TIMOTHY R SPAIN				
3104 TRER FROG LAME				
DELAND FORIDA 32724				
ARTICLE VII INCORPORATOR				
The name and address of the Incorporator is:				
TIMOTHY R SPAIN				
3104 TREE FROG LANG				
DELAND FLORIDA 32724				
*****************	******	*****	*****	***
Having been named as registered agent to accept service of process fo certificate, I am familiar with and accept the appointment as registered a				i in this

10/29/04 Date

/0/29/04 Date

Signature/Registered Agent

Jenothy R Spain

Signature/Incorporator