

P0500060325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2005 APR 21 PM 3:42

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TRANSMITTAL LETTER

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

SUBJECT: Sonya Van Epps Wallpapering 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: Sonya J Van Epps

Name (Printed or typed)

541 Old Geneva Rd.

Address

Geneva, Fl. 32732

City, State & Zip

407-416-1945

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:

Sonya Van Epps Wallpapering Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

541 Old Geneva Rd
Geneva, Fl. 32732

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To comply with State of Florida law concerning Workmen's Compensation
Exemption

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sonya J Van Epps
541 Old Geneva Rd.
Geneva, Fl. 32732
President

Charles W. Van Epps

ARTICLE VI REGISTERED AGENT

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

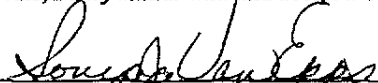
Sonya J Van Epps
541 Old Geneva Rd.
Geneva, Fl. 32732

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sonya J Van Epps
541 Old Geneva Rd.
Geneva, Fl. 32732

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

4-19-2005

Date



Signature/Incorporator

4-19-2005

Date

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2005 APR 21 P 3:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA