

P05000071326

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

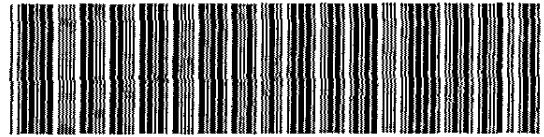
(Business Entity Name)

(Document Number)

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AND
05 MAY 16 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05-16

TRANSMITTAL LETTER

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

SUBJECT: Hurricane Shutter Installers and Home
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX) Inspection, Inc

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: Eric C Weeks
Name (Printed or typed)

4319 NW 112th Avenue
Address

Coral Springs FL 33065
City, State & Zip

954-614-7417
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:

Hurricane Shutter Installers and Home Inspections Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4319 NW 112th Avenue
Coral Springs, FL 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Shutter Installation

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Eric Weeks - President

ARTICLE VI REGISTERED AGENT

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

Mary Beth Weeks
4319 NW 112th Avenue
Coral Springs, FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Eric Weeks
4319 NW 112th Avenue
Coral Springs, FL 33065

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

Mary Beth Weeks
Signature/Registered Agent

5/12/05
Date

Eric Weeks
Signature/Incorporator

5/12/05
Date

AND
FILED
05 MAY 16 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA