

PO5000081873

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

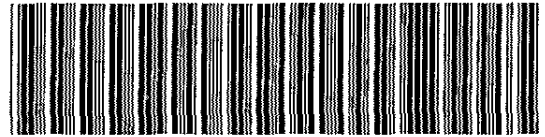
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000055702620

05/07/05--01050--025 **70.00

RECEIVED
05 JUN -7 PM 2:03
FILED
TALLAHASSEE, FLORIDA
05 JUN -7 PM 2:04
SECRETARY OF STATE

TRANSMITTAL LETTER

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

SUBJECT: Buxton's Constnuction 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: James R. Fleming
Name (Printed or typed)

501 Persimmon Rd.
Address

Sopchoppy FL 32358
City, State & Zip

(850) 567-0835
Daytime Telephone number

FILED
05 JUN -7 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Buxton's Construction INC.

✓ ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 501 Persimmon Rd
Sopchoppy Fl 32358

✓ ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Lawful business

✓ 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):

JAMES R. FLEMING 501 Persimmon Rd President
Sopchoppy Fl 32358

ARTICLE VI REGISTERED AGENT

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

Vina B. Fleming 501 Persimmon Rd
Sopchoppy Fl 32358

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

James R Fleming 501 Persimmon Rd
Sopchoppy Fl 32358

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]
Signature/Registered Agent

6.7.05

Date

[Signature]
Signature/Incorporator

6.7.05

Date

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 JUN -7 PM 2:04