

POS000083287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

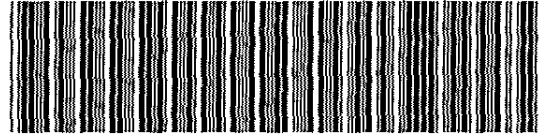
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
05 JUN -8 PM 1:59

J. Shivers JUN 09 2005

WJS-27457

## TRANSMITTAL LETTER

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

**SUBJECT:** PICK-IT FENCES 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                    & Certificate of Status

☐ \$78.75      ☒ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                                    & Certificate of  
                                    Status

**ADDITIONAL COPY REQUIRED**

**FROM:** SHAWN D. STONE & LORI ANN JACUSIS  
Name (Printed or typed)

5716 GOLDEN NUGGET DR.

Address

HOLIDAY, FLORIDA 34690

City, State & Zip

727-937-9717

Daytime Telephone number

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**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:

UPICK-IT FENCES INC.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5716 GOLDEN NUGGET DR.  
HOLIDAY, FLORIDA 34690

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FENCE MANUFACTURER & INSTALLATION

## 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):

SHAWN D. STONE (CEO)  
LORI ANN JACUSIS (CFO)  
5716 GOLDEN NUGGET DR.  
HOLIDAY, FLORIDA 34690

## ARTICLE VI REGISTERED AGENT

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

LORI ANN JACUSIS  
5716 GOLDEN NUGGET DR.  
HOLIDAY, FLORIDA 34690

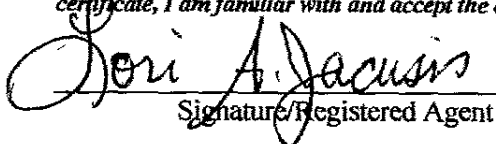
## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

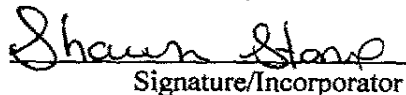
SHAWN D. STONE  
5716 GOLDEN NUGGET DR.  
HOLIDAY, FLORIDA 34690

\*\*\*\*\*

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

6-6-05  
Date

  
Signature/Incorporator

6-6-05  
Date

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