

P05000085411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☒ WAIT

☐ MAIL

(Business Entity Name)

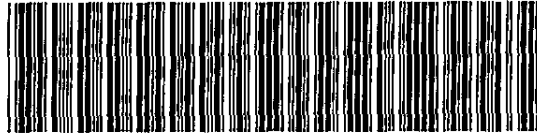
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TENTATIVE OF STATE  
DIVISION OF CORPORATIONS  
05 JUN 14 PM 3:46  
05 JUN 13 PM 3:46

W05-29114

B. McKnight JUN 14 2005

## TRANSMITTAL LETTER

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

SUBJECT: Permit Gitters, 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: Kevin Gaby  
Name (Printed or typed)  
4057 Crawfordville Hwy.  
Address  
Crawfordville, FL 32327  
City, State & Zip  
850-528-3074  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

June 13, 2005

KEVIN GABY  
4057 CRAWFORDVILLE HWY  
CRAWFORDVILLE, FL 32327

SUBJECT: PERMIT GITTERS, INC.  
Ref. Number: W05000029114

We have received your document for PERMIT GITTERS, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

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) 245-6931.

Becky McKnight  
Document Specialist  
New Filings Section

Letter Number: 305A00041022

# ARTICLES OF INCORPORATION

## ARTICLE I - NAME

The name of the corporation shall be: Permit Gitters, Inc.

## ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing address shall be:

4057 Crawfordville Highway  
Crawfordville, FL 32327.

## ARTICLE III - PURPOSE

The purpose for which this corporation is organized is to act as consultants to homeowners attempting to obtain permits in Wakulla and Franklin counties. We will work continuously with the building departments in Wakulla and Franklin counties to assure that we are providing accurate, up-to-date information to homeowners. We will assist homeowners by providing lists of licensed subcontractors and by obtaining, completing and submitting appropriate permit applications. Permit Gitters, Inc. will not act as general contractor or perform any services requiring a contractor license.

## ARTICLE IV - SHARES

The number of shares of stock is 100. Kevin Gaby will hold 60, Kerry R. Gaby will hold 30 and Tammy LeVaughn will hold 10.

## ARTICLE V - INITIAL OFFICERS AND DIRECTORS

The names, addresses and titles of the officers are:

Kevin Gaby, President  
4057 Crawfordville Highway  
Crawfordville, FL 32327

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**ARTICLE V - INITIAL OFFICERS AND DIRECTORS**  
**(cont.)**

Kerry R. Gaby, Secretary  
4057 Crawfordville Highway  
Crawfordville, FL 32327

Tammy LeVaughn, Vice President  
37 Montgomery Drive  
Crawfordville, FL 32327

**ARTICLE VI - REGISTERED AGENT**

The name and address of the registered agent is:

Kevin Gaby  
4057 Crawfordville Highway  
Crawfordville, FL 32327

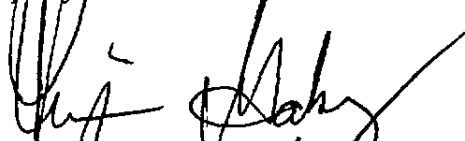
**ARTICLE VII - INCORPORATOR**

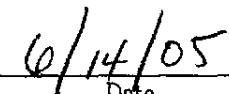
The name and address of the Incorporator is:

Kevin Gaby  
4057 Crawfordville Highway  
Crawfordville, FL 32327

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DIVISION OF CORPORATIONS  
05 JUN 14 PM 3:46

\*\*\*\*\*  
*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

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date