

Pa5000090063

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

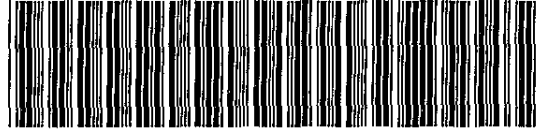
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05 JUN 23 PM 4: 01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Burch JUN 23 2005

## TRANSMITTAL LETTER

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

SUBJECT: PALM VALLEY WOODWORKS 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: PATRICK V. ROBINSON, LLC  
Name (Printed or typed)

4029 ATLANTIC BLVD.  
Address

JACKSONVILLE, FL 32207  
City, State & Zip

904 - 396 - 5400  
Daytime Telephone number

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

**ARTICLES OF INCORPORATION**  
**Of**  
**PALM VALLEY WOODWORKS, INC.**

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

**ARTICLE I.**

The name of the corporation shall be:

**Palm Valley Woodworks, Inc.**

**ARTICLE II.**

The principal place of business and mailing address of this corporation shall be:

**186 N. Roscoe Blvd.  
Ponte Vedra Beach, FL 32082**

**ARTICLE III.**

The purpose for which the corporation is organized is:

**Any lawful retail, wholesale, or service business.**

**ARTICLE IV.**

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**1000**

**ARTICLE V.**

The names and street addresses of officers are:

**William Olander, President  
186 N. Roscoe Blvd.  
Ponte Vedra Beach, FL 32082**

**FILED**  
**05 JUN 23 PM 4:01**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

Janice Olander, Secretary  
186 N. Roscoe Blvd.  
Ponte Vedra Beach, FL 32082

**ARTICLE VI.**

**The name and address of the registered agent are:**

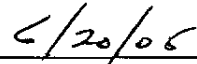
Mark R. Patrick  
4029 Atlantic Blvd.  
Jacksonville, FL 32207

**ARTICLE VII.**

**The name and address of the incorporator are:**

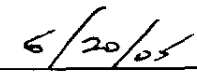
Mark R. Patrick  
4029 Atlantic Blvd.  
Jacksonville, FL 32207

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

  
\_\_\_\_\_  
Date

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
\_\_\_\_\_  
Signature /Registered Agent

  
\_\_\_\_\_  
Date