

P05000092657

(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



800055576268

06/09/05--01030--004 **78.75

FILED
CLERK OF COURT
JUN 28 PM 1:20
JUN 28 2005

J. Shivers JUN 29 2005

205-28642

TRANSMITTAL LETTER

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

SUBJECT: Shawn Marshall 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: Shawn Marshall

Name (Printed or typed)

137 Poe Drive S.E.

Address

Winter Haven, Florida 33884

City, State & Zip

863-318-8162

Daytime Telephone number

05 JUN 28 PM 1:30
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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:

Shawn Marshall INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

137 Poe Drive S.E.
Winter Haven, Florida 33884

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Cable Contractor

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):

Kelly Marshall Treasurer
137 Poe Drive S.E.
Winter Haven, Florida 33884

FILED
CLERK OF STATE
DIVISION OF CORPORATION
05 JUN 28 PM 1:30

ARTICLE VI REGISTERED AGENT

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

Shawn Marshall
137 Poe Drive S.E.
Winter Haven, Florida 33884

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Shawn Marshall
137 Poe Drive S.E.
Winter Haven, Florida 33884

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

6-5-05

Date



Signature/Incorporator

6-5-05

Date