

POS000113766

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

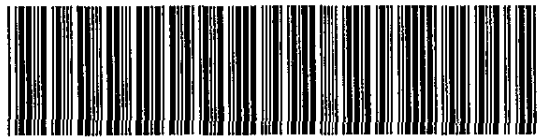
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900058238379

08/10/05--01010--005 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE
05 AUG 16 AM 8:17

J. Shivers AUG 17 2005

1405-37849

TRANSMITTAL LETTER

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

SUBJECT: STRICTLY PLANTATION SHUTTERS, 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 PONTELLO
Name (Printed or typed)

1675 TIMBER CROSSING LN.
Address

JACKSONVILLE, FL 32225
City, State & Zip

904-813-4732
Daytime Telephone number

05 AUG 16 AM 8:17

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: STRICTLY PLANTATION SHUTTERS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 1675 TIMBER CROSSING LN.
JACKSONVILLE, FL 32225

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: RETAIL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: ~~25~~ 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

<u>JAMES J. PONTEILLO</u> <u>1675 TIMBER CROSSING LN.</u> <u>JACKSONVILLE, FL 32225</u> <u>PRESIDENT</u>	<u>ANDREW RILEY</u> <u>2102 BRIGHTON BAY TRAIL</u> <u>JACKSONVILLE, FL 32246</u> <u>VICE PRESIDENT</u>
---	---

ARTICLE VI REGISTERED AGENT

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

JAMES J. PONTEILLO
1675 TIMBER CROSSING LN.
JACKSONVILLE, FL 32225

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES J. PONTEILLO
1675 TIMBER CROSSING LN.
JACKSONVILLE, FL 32225

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

7/25/05
Date

[Signature]
Signature/Incorporator

7/25/05
Date

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
05 AUG 16 AM 8:17