

P05000120819

(Requestor's Name)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 1 2005  
t. Burch

## TRANSMITTAL LETTER

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

SUBJECT: McDonnell Appraisal Service, 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: Tim J. McDonnell  
Name (Printed or typed)

253 Grove St.  
Address

ORLANDO, FL. 32835  
City, State & Zip

407-234-5447  
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

August 25, 2005

TIM J. MC DONNELL  
253 GROVE ST  
ORLANDO, FL 32835

SUBJECT: MC DONNELL APPRAISAL SERVICE, INC.  
Ref. Number: W05000040209

We have received your document for MC DONNELL APPRAISAL SERVICE, 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 a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6928.

Tim Burch  
Document Specialist  
New Filings Section

Letter Number: 405A00053874

**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:

Mc Donnell Appraisal Service, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

253 Grove Street  
Orlando, Fl. 32835

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawfull business

**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):

Tim J. Mc Donnell, President

**ARTICLE VI REGISTERED AGENT**

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

I herby am familar with and accept the duties and responsibilities of Registered Agent. Tim J. Mc Donnell

253 Grove Street  
Orlando, Fl. 32835

signed ...  
Tim J. Mc Donnell

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Tim J. Mc Donnell  
253 Grove Street  
Orlando, Fl. 32835

\*\*\*\*\*

*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

Tim J. Mc Donnell

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TALLAHASSEE, FLORIDA