

05000145983

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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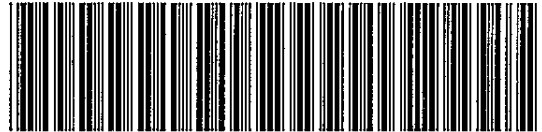
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05 OCT 28 PM 7:33
TALLAHASSEE, FLORIDA

10/31/05
[Signature]

COVER LETTER

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

SUBJECT: All County Roofing Corporation
(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: Joshua Randall Young
Name (Printed or typed)

19640 NE 73 Terrace Road
Address

Citra, Florida 32113
City, State & Zip

352-595-3425
Daytime Telephone number

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:

All County Roofing Corporation

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

19640 NE 73 Terrace Road
Citra, FL 32113

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Anything we can do with a roofing license
within the law.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Joshua R. Young, 19640 NE 73 Terr. Rd. Citra, FL 32113, Presider
Tracy Amanda Young, 19640 NE 73 Terr. Rd. Citra, FL 32113,
~~Joshua R. Young~~ Vice President.

ARTICLE VI REGISTERED AGENT

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

Joshua R. Young
19640 NE 73 Terrace Road
Citra, FL 32113

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Joshua R. Young
19640 NE 73 Terrace Road
Citra, FL 32113

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

10-27-05

Date



Signature/Incorporator

10-27-05

Date

FILED

05 OCT 28 PM 7:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA