

PO5000149196

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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STATE
TREASURY
FLORIDA

✓

11/14/05

COVER LETTER

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

SUBJECT: Acure Concrete Saw Cuts 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: _____
Name (Printed or typed)

P.O. Box 9595 - 122 Ledger Lakes
Address

Panama City Bld, FL 32417
City, State & Zip

850 - 832-0949 or 850 - 236-5588
Daytime Telephone number

IKE Duren **SAVE**
AUTHORIZATION BY PHONE TO
CORRECT ✓ name spelling?
DATE 11/8/05
DOC EXAM VJA

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:

Acumen Concrete Services Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

P.O. Box 9595
PCB, FL 32417

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Concrete work for hire

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ike Dore PS / VP

~~Amelia Pack Sec~~

Arian Dore Treas Sec

ARTICLE VI REGISTERED AGENT

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

Ike Dore
122 Ledger Lakes Dr (Box 9595)
P.O. Box 9595, PCB, FL 32417

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ike Dore
122 Ledger Lakes (Box 9595)
P.O. Box 9595, PCB, FL 32417

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



Signature/Incorporator

11/3/02

Date

11/3/02

Date

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CLERK OF STATE
TALLAHASSEE, FLORIDA