

PO5000149310

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

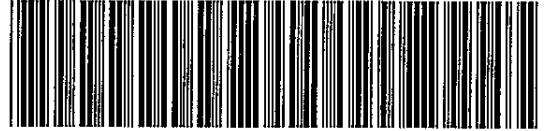
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11/24/05 - 01005 --- 010 \*\*78.75

FILED  
05 OCT 24 AM 9:04  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

✓  
11/19/05 SF  
~~10/25/05~~  
10/25/05  
SF

## COVER LETTER

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

SUBJECT: C. Johnson 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: Carla Johnson  
Name (Printed or typed)

po Box 15162 Gainesville Fl 32604  
Address

Gainesville Fl 32604  
City, State & Zip

(352) 281-7411

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

October 25, 2005

CARLA JOHNSON  
PO BOX 15162  
GAINESVILLE, FL 32604

SUBJECT: C JOHNSON INC  
Ref. Number: W05000048682

We have received your document for C JOHNSON 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document must state the number of shares of authorized stock.

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 designate who the Incorporator is in article VII.,

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) 245-6955.

Suzanne Hawkes  
Document Specialist  
NEW FILINGS

Letter Number: 505A00064701

**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:

C. Johnson INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

2035 NW 33rd Ave Gainesville Fl 32601

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

C&J Painting / Cleaning Services

**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):

Carla Johnson/Director/Owner

**ARTICLE VI REGISTERED AGENT**

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

Carla Johnson

2035 NW 33rd Ave Gainesville Florida 32601

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Carla Johnson

Po Box 15162 Gainesville Fl 32604

\*\*\*\*\*

*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*

Carla Johnson

\_\_\_\_\_  
Signature/Registered Agent

Carla Johnson

\_\_\_\_\_  
Signature/Incorporator

10/20/03

\_\_\_\_\_  
Date

10/20/05

\_\_\_\_\_  
Date

FILED  
05 OCT 24 AM 9:04  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA