

P05000157781

(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  
12/1



500061686735

11/29/05--01048--007 \*\*78.75

FILED  
05 NOV 29 PM 4:50

## COVER LETTER

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

SUBJECT: Misty L. Hinson, 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: Beryl N. Stokes, III

Name (Printed or typed)

1318 Bowman St.

Address

Clermont, FL 34711

City, State & Zip

(352)243-5700

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:

Misty L. Hinson, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailing address is:

2255 S. Lakeshore Dr.  
Clermont, FL 34711

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all Lawful Business specifically Real Estate

### **ARTICLE IV SHARES**

The number of shares of stock is:

1000

### **ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Misty L. Hinson, President  
2255 S. Lakeshore Dr.  
Clermont, FL 34711

### **ARTICLE VI REGISTERED AGENT**

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

Beryl N. Stokes, III  
1318 Bowman St.  
Clermont, FL 34711

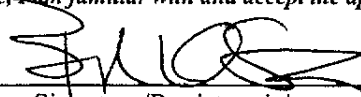
### **ARTICLE VII INCORPORATOR**

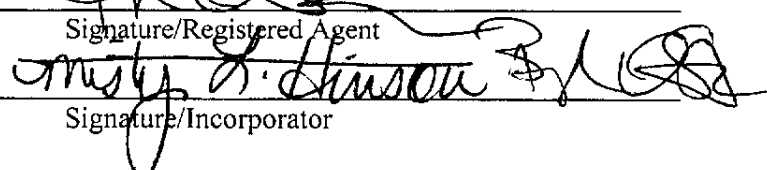
The name and address of the Incorporator is:

Beryl N. Stokes, III  
1318 Bowman St.  
Clermont, FL 34711

\*\*\*\*\*

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

FILED  
05 NOV 29 PM 4:50  
CLERK OF DISTRICT COURT  
CLERK OF DISTRICT COURT

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Date