P06000009056

(Req	uestor's Name)	
(Add	iress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



400063639114

01/17/06--01023--005 **70.00



COVER LETTER

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

SUBJECT: Cust	om Vinyl Products, Inc.		
	(PROPOSED CORPORA)	E NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	ginal and one (1) copy of the artic	les of incorporation and	l a check for:
▼ \$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
	i		& Certificate of
		_	Status
		ADDITIONAL CO	DPY REQUIRED
	•		
_			
FROM: G	aìl Knowles		
	Name (Printed or typed)	
	4004 Laurian A.		
	1604 Louise Av	ddress	
	r	daress	
	D		
	Panama City, Fl. 32401		
	City,	State & Zip	
	850-785-2209		
		elenhone 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:

Custom Vinyl Products Inc.

C!! ED

06 JAN 17 PM 12:39

TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

P.O. Box 15643 Panama City, Fi. 32401

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

manufacturing of vinyl fence and products

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):

Gail Knowles, Secretary-Treasurer

Frank Knowles, Vice President

60 shares 30 shares

Amanda Vossen, President

10 shares

ARTICLE VI REGISTERED AGENT

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

Gail Knowles, 1604 Louise Av, Panama City, Fl 32401

ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator is:

Gail Knowles 1604 Louise Av

Panama City, Fl. 32401

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

1-12-2006 Date 1-12-2006 Date Signature/Incorporator