

PD6000042285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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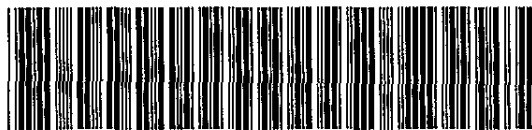
(Business Entity Name)

(Document Number)

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

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06 MAR 23 PM 3:27  
SECRETARY OF STATE  
CALIFORNIA

C.S. 3-23

## COVER LETTER

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

**SUBJECT:** Central Florida Fence Installers, 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:** Emery H. Cary

Name (Printed or typed)

109 Dolores Drive

Address

Altamonte Springs, FL 32701

City, State & Zip

407-331-0776

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:

Central Florida Fence Installers, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

109 Dolores Drive  
Altamonte Springs, FL 32701

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Profit

### 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):

Emery H. Cary, President  
109 Dolores Drive  
Altamonte Springs, FL 32701

### ARTICLE VI REGISTERED AGENT

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


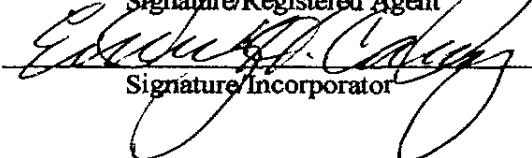
Emery H. Cary, President  
109 Dolores Drive  
Altamonte Springs, FL 32701

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Emery H. Cary, President  
109 Dolores Drive  
Altamonte Springs, FL 32701

\*\*\*\*\*  
*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

06 MAR 23 PM 3:27

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

March 17, 2006

Date

March 17, 2006

Date