

206006054444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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Certificates of Status

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TALLAHASSEE, FLORIDA

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J. Shivers APR 17 2006

COVER LETTER

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

SUBJECT: Carlton Jackson Carpentry, 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: CARLTON JACKSON
Name (Printed or typed)

2076 Naturalwells Dr.
Address

Woodville, FLA.
City, State & Zip

850-228-7010 / 229-269-2271
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

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:

CARLTON JACKSON Carpentry INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2076 Naturalwells Dr. PO Box 156
Woodville, FL 32362

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Carpentry

ARTICLE IV SHARES

The number of shares of stock is:

10,000.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Carlton JACKSON President 2076
Roland JACKSON Vice President naturalwells Dr
woodville, FLA
1892-5 Forks Rd
Boston, GA 31626

ARTICLE VI REGISTERED AGENT

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

CARLTON JACKSON
2076 Naturalwells Dr.
Woodville, FLA 32362

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Carlton JACKSON
2076 Naturalwells Dr.
Woodville, FLA 32362

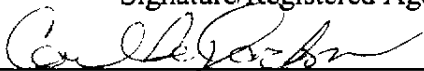
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

4-

Date



Signature/Incorporator

4-

Date

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06 APR 17 PM 2:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA