

PO6000085317

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

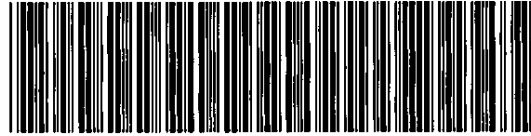
(Business Entity Name)

(Document Number)

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06/23/06--01040--016 **70.76

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

06 JUN 23 PM 1:27

RECEIVED

06 JUN 23 PM 1:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

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

SUBJECT: George Combs Painting 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: George D Combs
Name (Printed or typed)

1534 Sand Trail LN
Address

TALLAHASSEE FL 32305
City, State & Zip

850-510-7204
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: *George Combs Painting Inc*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *1534 SANDTRAIL LN
TALLAHASSEE FL, 32305*

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *Painting*

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):
Willie Baxter 1534 sandtrail LN
John Grayson same

ARTICLE VI REGISTERED AGENT

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

*George Combs 1534 sandtrail LN
TALLAHASSEE FL, 32305*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

*George Combs 1534 sandtrail LN
Tallahassee FL, 32305*

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]

Signature/Registered Agent

6-23-06

Date

[Signature]

Signature/Incorporator

6-23-06

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED