

P06000091474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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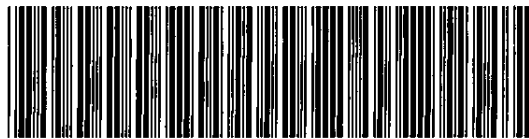
(Business Entity Name)

(Document Number)

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05/24/06--01037--004 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
06 JUL 11 AM 10:58

W06-24399

COVER LETTER

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

SUBJECT: S.R. 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: Sharon Ramsey

Name (Printed or typed)

315 19th Street N.

Address

Jacksonville Beach, Fl. 32250

City, State & Zip

904-962-7693

Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 26, 2006

SHARON RAMSEY
315 19TH STREET N.
JACKSONVILLE, FL 32250

SUBJECT: S.R. INC.
Ref. Number: W06000024399

We have received your document for S.R. INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6972.

Doris Brown
Document Specialist
New Filing Section

Letter Number: 906A00037039

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

06 JUL 11 AM 10:48

RECEIVED

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

ARTICLE I NAME

The name of the corporation shall be:

S. A. Ramsey Inc.

06 JUL 11 AM 10:58

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

315 19th St. North
Jacksonville Beach, FL 32250

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any and all business To substantially perform
of the State of Florida legal under the laws

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

Sharon Ramsey 315 19th St. N.
Jacksonville Bch, FL 32250

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Sharon Ramsey
315 19th St. N.
Jacksonville Bch, FL 32250

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

Sharon Ramsey
Signature/Registered Agent

Sharon Ramsey
Signature/Incorporator

6/30/11
Date

6/30/11
Date