

P06000106194

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

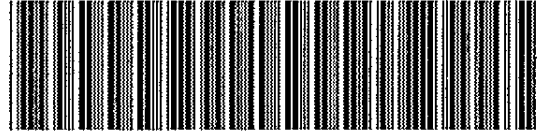
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/14/06--01016--003 **78.75

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08-14 AM 9:25
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08-14-06

Pa

COVER LETTER

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

SUBJECT: PAVE THE WAY 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: CHERYL WOODFORD

Name (Printed or typed)

2747 GLENVIEW DR

Address

LAND O LAKES, FL 34639

City, State & Zip

813-433-6062

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:

PAVE THE WAY, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2747 GLENVIEW DR
LAND O LAKES, FL 34639

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEW BUSINESS

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):

CHERYL WOODFORD
PRESIDENT
2747 GLENVIEW DR
LAND O LAKES, FL 34639

ARTICLE VI REGISTERED AGENT

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

LORI GELINAS
3043 GULFWIND DR
LAND O LAKES, FL 34639

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CHERYL WOODFORD
2747 GLENVIEW DR
LAND O LAKES, FL 34639

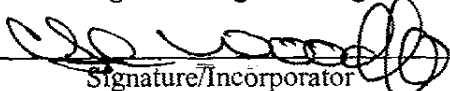
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

8-9-06

Date



Signature/Incorporator

8-10-06

Date

FILED
06 AUG 14 AM 9:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA