

PO000110154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

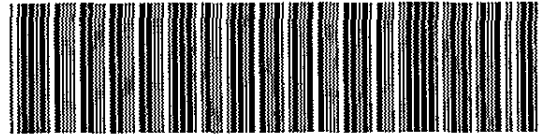
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08 AUG 21 AM 9:07
STATE OF MISSISSIPPI

PO

COVER LETTER

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

SUBJECT: William H Berry 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: William H Berry IV
Name (Printed or typed)

8496 Cypress Dr. North
Address

Fort Myers, FL 33912
City, State & Zip

239-245-7939
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:

William H Berry Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8496 Cypress Dr. North
Fort Myers, FL 33912

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all Lawful Business.

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

William H Berry IV
8496 Cypress Dr., North
Fort Myers, FL 33912
Title: President

ARTICLE VI REGISTERED AGENT

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

William H Berry IV
8496 Cypress Dr., North
Fort Myers, FL 33912

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

William H Berry IV
8496 Cypress Dr., North
Fort Myers, FL 33912

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

X William H Berry IV
Signature/Registered Agent

X William H Berry IV
Signature/Incorporator

8/16/06
Date

8/16/06
Date

FILED
06 AUG 21 AM 9:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA