

P06000110572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

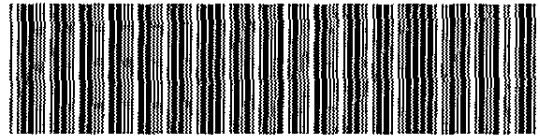
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06 AUG 23 PM 12:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CS 8-24

COVER LETTER

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

SUBJECT: Tom Fuller Stucco, 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: Tom Fuller Stucco, Inc.

Name (Printed or typed)

3470 E. Lee Dr.

Address

Inverness, FL 34453

City, State & Zip

352-302-2652

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:

Tom Fuller Stucco, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3470 E. Lee Dr. Inverness, FL 34453-9633

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:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Tom Fuller 3470 E. Lee Dr., Inverness, FL 34453-9633 (P)

ARTICLE VI REGISTERED AGENT

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

Tom Fuller 3470 E. Lee Dr., Inverness, FL 34453-9633

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tom Fuller 3470 E. Lee Dr., Inverness, FL 34453-9633

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

Thomas H. Fuller

Signature/Registered Agent

Thomas H. Fuller

Signature/Incorporator

FILED

06 AUG 23 PM 12:58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8-21-06

Date

8-21-06

Date