

PO6000113495

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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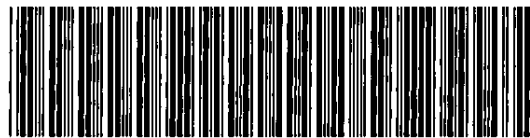
(Business Entity Name)

(Document Number)

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08/10/06--01028--004 **78.75

FILED
06 AUG 24 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
8/31

W06-35546

TRANSMITTAL LETTER

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

SUBJECT: Florida Association of Certified Inspectors, 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: Florida Association of Certified Inspectors, Inc.
Name (Printed or typed)

540 Orange Drive, #14

Address

Altamonte Springs, FL 32701

City, State & Zip

1-800-741-8008

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 11, 2006

FLORIDA ASSOCIATION OF CERTIFIED INSPECTORS, INC.
540 ORANGE DRIVE
#14
ALTAMONTE SPRINGS, FL 32701

SUBJECT: FLORIDA ASSOCIATION OF CERTIFIED INSPECTORS, INC.
Ref. Number: W06000035546

We have received your document for FLORIDA ASSOCIATION OF CERTIFIED INSPECTORS, 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 principal address must be at a street address. A post office box 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) 245-6879.

Ruby Dunlap
Regulatory Specialist
New Filing Section

Letter Number: 306A00050011

RECEIVED
06 AUG 24 AM 8:00
DIVISION OF CORPORATIONS

ARTICLES OF INCORPORATION

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

FILED

06 AUG 24 PM 3:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Florida Association of Certified Inspectors, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

~~P. O. Box 151555~~
~~Altamonte Springs, FL 32715~~

540 Orange Drive, #14
Altamonte Springs, FL 32701

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction Inspections

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):

Brooks Cobbum, President
P. O. Box 151555
Altamonte Springs, FL 32715

ARTICLE VI REGISTERED AGENT

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

Brooks Cobbum
540 Orange Drive, #14
Altamonte Springs, FL 32701

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Brooks Cobbum
P. O. Box 151555
Altamonte Springs, FL 32715

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

Brooks Cobbum

Signature/Registered Agent

8-7-06

Date

Brooks Cobbum

Signature/Incorporator

8-7-06

Date