## P06000131220

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## **COVER LETTER**

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

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
nclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
\$70.00 Filing Fee	\$78.75 Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,	
i milg ræ	& Certificate of Status	& Certified Copy	Certified Copy	

ADDITIONAL COPY REQUIRED

SIBRECKOTARETH Childress

FROM: OTABETH Childress

Name (Printed or typed)

3228 WAllington Dr

Address

Corlando Fl 32810

City, State & Zip

407-453-6013

Daytime Telephone number

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



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 2, 2006

LORABETH CHILDRESS 3228 WEALLINGTON DR ORLANDO, FL 32810

SUBJECT: LORABETH CHILDRESS LLC

Ref. Number: W06000043169

We have received your document for LORABETH CHILDRESS LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please remove the LLC from the corporation name.,

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) 245-6925.

Cynthia Blalock Document Specialist New Filing Section

Letter Number: 206A00058368

## 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: Beth Childress INC. ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 3008 WAILING TON Dr. OFLANDO, Fl. 3081C ARTICLE III PURPOSE The purpose for which the corporation is organized is: CLEADING, PAINTING, ARTICLE IV SHARES The number of shares of stock is: INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s): 1 Chibbress (President) WAllington Oc

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

LOVA BETH Childress 3228 WALLINGTON OF ARTICLE VII INCORPORATOR 32810

The name and address of the Incorporator is:

Cora Beth Childress 3228 WALLINGTON OF OCLANDO EL BARIO

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
Signature/Incorporator

10-9-06 Date

-9-00