

PO6000147389

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(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02-11-28

## COVER LETTER

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

SUBJECT: **FIX IT ALL FL. 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: **JOHNNY KIRSTEN**

Name (Printed or typed)

**PO BOX 217**

Address

**WORTHINGTON SPRINGS FL. 32697**

City, State & Zip

**954 478 7574**

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 5, 2006

JOHNNY KIRSTEN  
P.O. BOX 217  
WORTHINGTON SPRINGS, FL 32697

SUBJECT: FIX IT ALL FL. INC.  
Ref. Number: W06000043846

We have received your document for FIX IT ALL FL. INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

An effective date may be added to the Articles of Incorporation if a 2007 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

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) 245-6047.

Carolyn Lewis  
Document Specialist  
New Filing Section

Letter Number: 306A00059137

LABS LINDA

## 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:

FIX IT ALL FL. INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

PO BOX 217  
WORTHINGTON SPRINGS  
FLORIDA 32697

8209 NW 290 AVE  
ALACHUA  
FL 32215

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MAINTENANCE & REPAIRS

### ARTICLE IV SHARES

The number of shares of stock is:

5000 (FIVE THOUSAND)

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JOHNNY KIRSTEN

PO BOX 217

WORTHINGTON SPRINGS

FLORIDA 32697

8209 NW 290 AVE  
ALACHUA FL 32215

### ARTICLE VI REGISTERED AGENT

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

Johnny Kirsten  
8209 NW 290 Ave  
Alachua FL 32215

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOHNNY KIRSTEN

PO BOX 217

WORTHINGTON SPRINGS

FL. 32697

8209 NW 290 AVE  
ALACHUA FL 32215

\*\*\*\*\*  
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

Incorporator

Signature/Incorporator

Date

Date

FILED  
06 NOV 27 PM 2:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11/20/06