

POC000155263

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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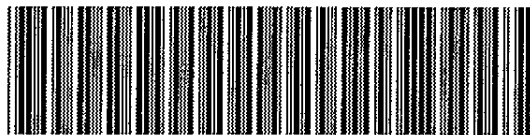
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

12/21/06

COVER LETTER

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

SUBJECT: P M Cox, Co
(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: Pamela M. Cox
Name (Printed or typed)

206 N. Lake Ave
Address

LeHigh, FL 33972
City, State & Zip

239-462-7876
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:

P M Cox, Co

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

206 N. Lake Ave
LeHigh, FL 33972

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Corporation

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Pamela M. Cox 206 N. Lake Ave LeHigh, FL 33972

ARTICLE VI REGISTERED AGENT

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

Pamela M Cox 206 N. Lake Ave LeHigh, FL 33972
Pamela M. Cox

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Pamela M. Cox 206 N. Lake Ave LeHigh, FL 33972
Pamela M. Cox

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

Pamela M. Cox

Signature/Registered Agent

12-06-06

Date

Signature/Incorporator

Date

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TALLAHASSEE, FLORIDA