

PO7000024368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

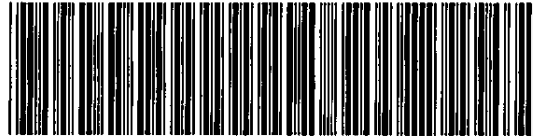
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

07 FEB 22 AM 11:21

FILED

A handwritten signature or initials in the bottom right corner of the page.

COVER LETTER

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

SUBJECT: CAMP ROAD BAIL BONDS 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 \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ALTON DALE MILLS
Name (Printed or typed)

4195 S. ORLANDO DR.
Address

SANFORD, FLORIDA 32773
City, State & Zip

321-383-2554
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:
CAMP ROAD BAIL BONDS INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:
4195 S. ORLANDO DR. SANFORD, FL 32773

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
WRITE BAIL BONDS

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):
ALTON DALE MILLS 4195 S. ORLANDO DR. SANFORD FL. 32773

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
ALTON DALE MILLS 4195 S. ORLANDO DR. SANFORD FL 32773

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:
ALTON DALE MILLS
4195 S. Orlando Dr.
Sanford, FL. 32773

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

A.D. Mills
Signature/Registered Agent

02-17-07
Date

A.D. Mills
Signature/Incorporator

02-17-07
Date