

PO7000030661

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

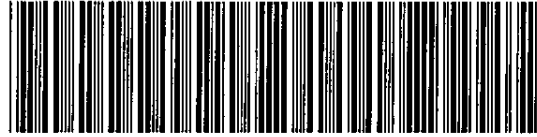
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Jackie Abbott Floors 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: Jackie Abbott
Name (Printed or typed)

5001 Water Wheel Ct
Address

Ocoee FL 34761
City, State & Zip

407-319-4509
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:

Jackie Abbott Floors Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5001 Water Wheel Ct
Ocoee Fl 34761

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to install floor covering

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):

Jackie Abbott - President
5001 Water Wheel Ct
Ocoee Fl 34761

ARTICLE VI REGISTERED AGENT

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

Jackie Abbott
5001 Water Wheel Ct
Ocoee Fl 34761

ARTICLE VII INCORPORATOR

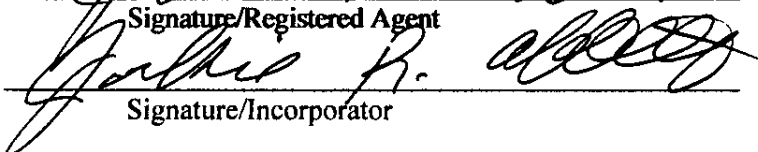
The name and address of the Incorporator is:

Jackie Abbott
5001 Water Wheel Ct
Ocoee Fl 34761

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

3/5/07
Date


Signature/Incorporator

3/5/07
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA