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(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL	
	i		
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	s of Status	
Special Instructions to Ei	ling Officer		
Special Instructions to Filing Officer:			

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SECRETARY OF STATE
TALLAHASSES FISHER

5/18/

COVER LETTER

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

SUBJECT: Thomas D. Kelley, Inc.		
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the arti	icles of incorporation and	a check for:
\$70.00 \$78.75	□ \$78.75	\$87.50
Filing Fee Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of
	ADDITIONAL CO	Status PY REQUIRED
·	1	-
FROM: Thomas D. Kelley		
	(Printed or typed)	
561 West Montrose St		
	Address	
Clermont, FL 34711		
City,	State & Zip	
321-299-4837		

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

Daytime Telephone number

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:

Thomas D. Kelley, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

561 West Montrose St. #8 Clermont, FL 34711

<u>ARTICLE III PURPOSE</u>

The purpose for which the corporation is organized is:

construction of swimming pools and spas

ARTICLE IV SHARES

The number of shares of stock is:

1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Thomas D. Kelley - President 561 West Montrose St. #8 Clermont, FL 34711

ARTICLE VI REGISTERED AGENT

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

Thomas D. Kelley 561 West Montrose St. #8 Clermont, FL 34711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Thomas D. Kelley 561 West Montrose St. #8 Clermont, FL 34711

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

Date

5/11/07

Date

OT MAY 16 M. S. LZ.