

PO700007595

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

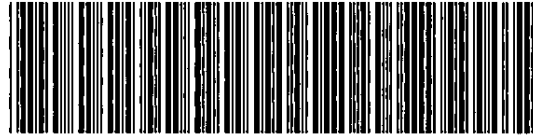
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2007 JUN 29 P 4:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7-2-07
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COVER LETTER

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

SUBJECT: MAS Builders, Incorporated

(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: Michael Alan Schoeppner

Name (Printed or typed)

6627 NW 32nd Street

Address

Gainesville, FL 32653

City, State & Zip

(352) 514-3315

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:

MAS Builders, Incorporated

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6627 NW 32nd Street
Gainesville, FL 32653

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MAS Builders, Incorporated is hereby established for the purpose of building and remodeling homes in the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael Alan Schoeppner
Director of Operations
6627 NW 32nd Street
Gainesville, FL 32653

ARTICLE VI REGISTERED AGENT

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

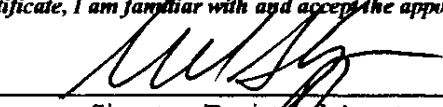
Michael Alan Schoeppner
6627 NW 32nd Street
Gainesville, FL 32653

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael Alan Schoeppner
6627 NW 32nd Street
Gainesville, FL 32653

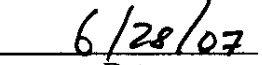
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



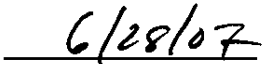
Signature/Registered Agent



Signature/Incorporator



Date



Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA