

PD7000080495

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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07 JUL 16 PM 2:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

B. McKnight JUL 16 2007

COVER LETTER

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

SUBJECT: SLK Contracting, 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: Sherrie L. Knop
Name (Printed or typed)

17116 S E 173rd Terrace Rd
Address

Weirsdale, FL 32195
City, State & Zip

(352) 267-2472
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:

SLK Contracting, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

17116 SE 173rd Terrace Rd.
Weirsdale, FL 32195

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction Contracting

ARTICLE IV SHARES

The number of shares of stock is:

10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Sherrie L. Knop, President
John R. Knop, Vice President
Sherrie L. Knop, Treasurer
Sherrie L. Knop, Secretary

ARTICLE VI REGISTERED AGENT

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

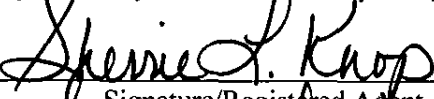
Sherrie L. Knop
17116 SE 173rd Terrace Rd.
Weirsdale, FL 32195

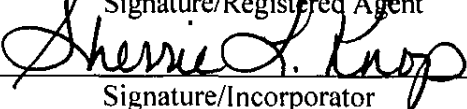
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

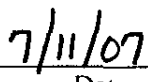
Sherrie L. Knop
17116 SE 173rd Terrace Rd.
Weirsdale, FL 32195

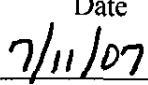
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent


Signature/Incorporator



Date


Date

APPROVED
AND
FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA