

P07000130693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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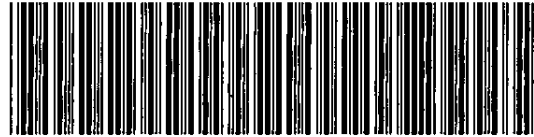
(Business Entity Name)

(Document Number)

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09/19/07--01018--016 \*\*78.75

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07 SEP 19 AM 10:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W07-57546  
+ 207-446960  
9/21/07



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 26, 2007

GJON VATA  
2083 ALFA ROMEO DR  
JACKSONVILLE, FL 32246

SUBJECT: DUVAL CONSTRUCTION, INC.  
Ref. Number: W07000057546

We have received your document for DUVAL CONSTRUCTION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes  
Regulatory Specialist II  
New Filing Section

Letter Number: 007A00067134



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 21, 2007

GJON VATA  
2083 AZFA ROMEO DR  
JACKSONVILLE, FL 32246

SUBJECT: DUVAL CONSTRUCTION, INC.  
Ref. Number: W07000046960

We have received your document for DUVAL CONSTRUCTION, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock.

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes  
Document Specialist  
New Filing Section

Letter Number: 707A00055735

## COVER LETTER

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

SUBJECT: DUVAL CONSTRUCTION, 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: GJON VATA  
Name (Printed or typed)

2083 AZFA POKED DR  
Address

JACKSONVILLE FL 32246  
City, State & Zip

904- 887- 2039  
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:

DUVAL CONSTRUCTION, INC.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/ mailing address is:

2083 ALFA ROMEO DR  
JAX, FL 32246

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PUBLIC SERVICE, REPAIR, NOT SPEC

**ARTICLE IV SHARES**

The number of shares of stock is:

ONE

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

GJON VATA VICE PRESIDENT  
2083 ALFA ROMEO DR  
JAX FL 32246

**ARTICLE VI REGISTERED AGENT**

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

2083 ALFA ROMEO DR  
JAX FL 32246 GJON VATA

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

GJON VATA  
2083 ALFA ROMEO DR  
JAX FL 32246

\*\*\*\*\*  
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

Dec/02/07  
\_\_\_\_\_  
Date

09/09/2007  
\_\_\_\_\_  
Date

FILED  
07 SEP 19 AM 10:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA