

PD 8000009889

(Requestor's Name)

(Address)

(Address)

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2008 JAN 28 P 4:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 2/1/08

1-28-08  
WC

## COVER LETTER

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

SUBJECT: TOTAL HOME SERVICES OF NORTH FL, 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      ☐ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: TOTAL HOME SERVICES OF NORTH FL, INC.  
Name (Printed or typed)

6721 CRILL AVENUE  
Address

PALATKA, FL 32177  
City, State & Zip

386-329-4095  
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)

EFFECTIVE DATE 2/1/08

## ARTICLE I NAME

The name of the corporation shall be: *TOTAL HOME SERVICES OF NORTH FL, INC.*

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: *6721 CRILL AVE  
PALATKA, FL 32177*

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is: *purpose of engaging in any activities or business permitted under the laws of the United States and the State of Florida.*

## ARTICLE IV SHARES

The number of shares of stock is: *100*

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

*Chip Jamison, President  
100 Point Ida Court  
Interlachen, FL 32148*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: *Chip Jamison*  
*100 Point Ida Court*  
*Interlachen, FL 32148*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: *Chip Jamison*  
*100 Point Ida Court*  
*Interlachen, FL 32148*

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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

*1/25/08*  
\_\_\_\_\_  
Date  
*1/25/08*  
\_\_\_\_\_  
Date

Article VII: The corporation of Total Home Services of North FL, Inc elects their business to begin on February 1, 2008.