

P08000026219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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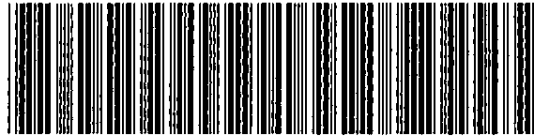
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2008 MAR 12 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Burch MAR 12 2008

COVER LETTER

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

SUBJECT: KELVIN LEE PLASTERING 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: KELVIN LEE

Name (Printed or typed)

119 STRATFORD SQ

Address

PORT ORANGE FL 32127

City, State & Zip

(386) 334-3329

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:

KELVIN LEE PLASTERING INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

119 STRATFORD SQ

PORT ORANGE FL 32137

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO DO SMALL CONSTRUCTION AND REPAIR WORK

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):

KELVIN LEE 119 STRATFORD SQ OWNER
PORT ORANGE FL 32137

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**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLE VI REGISTERED AGENT

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

ARTHUR JACKSON 1 FLORIDA PARK DR S #324
PALM COAST FL 32137

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

KELVIN LEE
119 STRATFORD SQ
PORT ORANGE FL 32127


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

2/20/08

Date



Signature/Incorporator

2/20/08

Date