

PO8000038187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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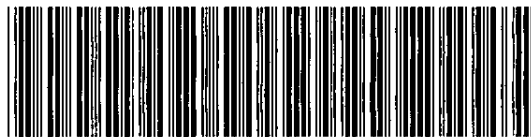
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED

2008 APR 14 P 3 58

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 15 2008
D.A. WHITE

COVER LETTER

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

SUBJECT: All Seasons Repairs, 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: Michael A. Semenov
Name (Printed or typed)

1704 19th Street
Address

Niceville, FL 32578
City, State & Zip

850-678-5363
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:

All Seasons Repairs, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

1704 19th Street
Niceville, FL 32578

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Repairs / Maintenance

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Michael A. Semenov, President
1704 19th St.
Niceville, FL 32578

Amy J. Semenov, Director
1704 19th Street
Niceville, FL 32578

ARTICLE VI REGISTERED AGENT

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

Michael A. Semenov
1704 19th Street
Niceville, FL 32578

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Michael A. Semenov
1704 19th Street
Niceville, FL 32578

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2009 APR 14 P 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

8 APR 08

Date



Signature/Incorporator

8 APR 08

Date