# P8988051240

(Requestor's Name)					
(10411000,0111100,					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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# **COVER LETTER**

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

	(FROFOSED CORFORA)	E NAME - MOST INCL	UDE 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  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED		
FROM: Law Office of Nicole Valerie Johnson, P.A.					
2866 waterbrook way					
Tallahassee Fl 32312 City, State & Zip					
860-727-4128  Daytime Telephone number					

NOTE: Please provide the original and one copy of the articles.

E-mail address: (to be used for future annual report notification)

### ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a for profit corporate entity under Florida Statutes, Chapter 607 and or Chapter 621, adopt(s) the following Articles of Incorporation.

## **ARTICLE I**

The name of this corporation shall be: PV DEVELOPMENT COMPANY, INC.

# **ARTICLE II**

The principal place of business address is: 5408 TOURAINE DRIVE, SUITE A TALLAHASSEE, FLORIDA 32308

The mailing address of corporation is: P.O. BOX 3465
THOMASVILLE, GA 31799

### **ARTICLE III**

The purpose for which this organization is formed: FOR ANY AND ALL LAWFUL PURPOSE

# **ARTICLE IV**

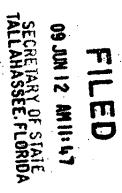
The number of shares of stock is: 100

### **ARTICLE V**

The Initial Directors are as follows:

Title: DIRECTOR GLADYS DUNBAR P.O. BOX 3465 THOMASVILLE, GA 31799

Title: DIRECTOR CLIFFORD DUNBAR P.O. BOX 3465 THOMASVILLE, GA 31799



The Initial Officers are as follows:

Title: PRESIDENT CLIFFORD DUNBAR P.O. BOX 3465 THOMASVILLE, GA 31799

Title: VICE PRESIDENT GLADY DUNBAR P.O. BOX 3465 THOMASVILLE, GA 31799

### **ARTICLE VI**

The name and Florida address of the registered agent is:

LAW OFFICE OF NICOLE VALERIE JOHNSON, P.A. 2866 WATERBROOK WAY TALLAHASSEE, FLORIDA 32312

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 of Registered Agent?

## ARTICLE V

The name and address of the Incorporator is:

NICOLE VALERIE JOHNSON, ATTORNEY AT LAW LAW OFFICE OF NICOLE VALERIE JOHNSON, P.A. 2866 WATERBROOK WAY

**TALLAHASSEE, FLORIDA 32312** 

Signature of Incorporator: