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(Requestor's Name) (Address) (Address)	000158920030
(City/State/Zip/Phone #)	08/12/0901020006 **78.50
(Business Entity Name)	· · · · · · · · · · · · · · · · · · ·
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Office Use Only	
	B. McKnight AUG 1 3 2009

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COVER LETTER

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

t,

SUBJECT: ______ ASPHALT MAINTENANCE & SEALCOAT, INC. (PROPOSED CORPORATE NAME - <u>MUST INCLUDE SUFFIX</u>)

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

S87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM:

CHARLES WILLEY

Name (Printed or typed)

5677 HERON LANE #107

Address

NAPLES, FL 34110 City, State & Zip

(239)206-6561

Daytime Telephone number

BILLMCCRONE@COMCAST.NET

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

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:

ASPHALT MAINTENANCE & SEALCOAT, INC.

ARTICLE II PRINCIPAL OFFICE

The principal <u>street</u> address and mailing address, if different is: 5677 HERON LANE NAPLES, FL 34110

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ASPHALT MAINTENANCE, REPAIR AND SEALCOATING.

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): TYRONE WILLEY, PRESIDENT 5677 HERON LN. #107 NAPLES, FL 34110 CHARLES WILLEY, SECRETAY, TREASURER 5677 HERON LN. #107 NAPLES FL 34110

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> (P.O. Box **NOT** acceptable) of the registered agent is: CHARLES WILLEY 5677 HERON LANE #107 NAPLES, FL 34110

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

WILLIAM MCCRONE 101 SHARWOOD DRIVE NAPLFS FL 34110

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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 cupacity)

Signature/Bogistered Agent CWARLES Wiley ignature/Incorporator WM. MCC

 $\frac{\mathcal{G}_{2}^{2}}{\mathcal{G}_{2}^{2}}$ Date $\mathcal{G}_{2}^{2} \mathcal{G}_{2}^{2}$