

P10000086128

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

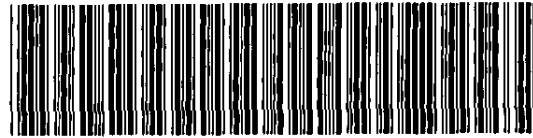
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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10 OCT 21 AM 11:57

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

10 OCT 21 PM 12:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10/21/10

## COVER LETTER

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

SUBJECT: Quality one Construction 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 B. Soave  
Name (Printed or typed)

3194 Woodlark Rd  
Address

Panama City FL 32405  
City, State & Zip

(810) 441-7915  
Daytime Telephone number

Soave810@yahoo.com  
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

I Michael B. Scave will not Revoke The  
Dissolution of Quality One Construction INC.  
Doc # P09000062939



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CLERK OF COURT  
TALLAHASSEE, FLORIDA

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: Qualityone Construction INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

3194 Wood Valley Rd  
Panama City FL  
32405

Mailing address, if different is:

3194 Wood Valley Rd  
Panama City FL  
32405

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

any and all lawful Business

**ARTICLE IV SHARES**

The number of shares of stock is: 1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Michael B Soave (pres) Name and Title: \_\_\_\_\_

Address: 3194 Wood Valley Rd Address: \_\_\_\_\_

Panama City FL  
32405

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: 3194 Wood Valley Rd

Address: Panama City FL  
32405

Michael B Soave

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Michael B Soave

Address: 3194 Wood Valley Rd  
Panama City FL  
32405

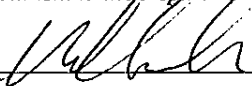
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

10/21/10  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

10/21/10  
Date

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TALLAHASSEE, FLORIDA