

P10000101154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

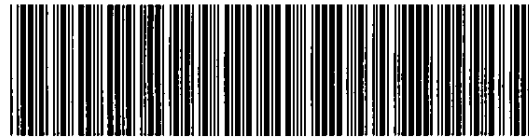
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



100188426731

12/15/10--01012--012 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2010 DEC 15 AM 9:08

FILED

J. Shivers DEC 16 2010

## COVER LETTER

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

SUBJECT: Bells Carpentry 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: Steven Bell  
Name (Printed or typed)

4004 Field Brook Lane  
Address

Jacksonville FL 32223  
City, State & Zip

904 376-9379  
Daytime Telephone number

Bellbrothers4004@yahoo.com  
E-mail address: (to be used for future annual report notification)

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

2010 DEC 15 AM 9:08

FILED

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: Bells Carpentry Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

4004 Field Brook Lane  
Jacksonville FL 32223

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Trim Carpentry &  
Cabinet Installation

**ARTICLE IV SHARES**

The number of shares of stock is: one

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

Name and Title: Steven Bell  
Address: 4004 Field Brook Lane  
JACKSONVILLE FL 32223

Name and Title: President

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: Steven Bell  
Address: 4004 Field Brook Lane  
Jacksonville FL 32223

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Steven Bell  
Address: 4004 Field Brook Lane  
Jacksonville FL 32223

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

Steven Bell

Required Signature/Registered Agent

12/13/10  
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.

Steven Bell

Required Signature/Incorporator

12/13/10  
Date

FILED  
2010 DEC 15 AM 9:08  
CLERK OF STATE  
TALLAHASSEE, FLORIDA