

PI 0000101387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

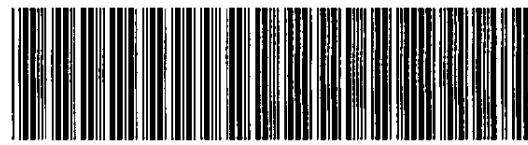
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700188707857

12/16/10--01010--008 **78.75

2010 DEC 16 PM 1:42
SHERIFF'S OFFICE
TALLAHASSEE, FLORIDA

PI 0000101387

Office Use Only
DEC 16 2010

COVER LETTER

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

SUBJECT: Schmidt Masonry, 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: James D. Schmidt
Name (Printed or typed)

1501 Lady Ave
Address

Ocole, FL 34761
City, State & Zip

407-656-6923
Daytime Telephone number

Kschmidt27@cfi.rr.com
E-mail address: (to be used for future annual report notification)

2010 DEC 16 PM 1:42
SCHMIDT, JAMES D
INTEGRATED FILING
FILED

FILED

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: Schmidt Masonry, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

1501 Lady Ave
Ocoee FL 34761

Mailing address, if different is:

1604 Blackwood Ave
Gotha

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

any lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Schmidt, James D. Name and Title:

Address: 1501 Lady Ave
Ocoee, FL 34761

Name and Title: Name and Title:
Address: Address:

Name and Title: Name and Title:
Address: Address:

ARTICLE VI REGISTERED AGENT

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

Name: Dilysrd, Joyce E.
Address: 1604 Blackwood Ave
Gotha FL 34734

2010 DEC 16 PM 1:42
SCHMIDT, JAMES D. DILYSRD
TALLAHASSEE, FLORIDA
FILED

ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Schmidt, James D.
Address: 1501 Lady Ave
Ocoee, FL 34761

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

Joyce E. Dilysrd

Required Signature/Registered Agent

11/16/10
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.

James D. Schmidt
Required Signature/Incorporator

11/16/10
Date