

PI1000020629

(Requestor's Name)

(Address)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

11 FEB 25 PM 4:49

APPROVED  
AND  
FILED

174

## COVER LETTER

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

SUBJECT: Magnolia Builders, Incorporated  
(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: DARRELL LECITY  
Name (Printed or typed)  
5000 MOBILE HWY. SUITE 7  
Address  
PENSACOLA, FLORIDA 32506  
City, State & Zip  
850-453-1219  
Daytime Telephone number  
MAGNOLIANEWHOMES@HOTMAIL.COM  
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)

APPROVED  
AND  
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**ARTICLE I NAME**

The name of the corporation shall be: MAGNOLIA BUILDERS, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
5000 MOBILE HWY  
SUITE 7  
PENSACOLA, FL 32506

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

CONSTRUCTION OF HOMES AND REMODELING

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: DARRELL LIECHTY, PRES.  
Address: 3443 MAIKAI DR  
PENSACOLA, FL 32526

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

Name and Title: JONATHAN LIECHTY, Treasurer  
Address: 3443 MAIKAI DR  
PENSACOLA, FL 32526

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

Name and Title: JOSHUA BRITNELL, Vice President  
Address: 6814 CEDAR LAKE CIRCLE  
PENSACOLA, FL 32526

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: ED FLEMING  
Address: 25 West Government St.  
Pensacola, FL 32502

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: CAROL LIECHTY  
Address: 5000 MOBILE HWY SUITE 7  
PENSACOLA, FL 32506

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

Ed Fleming

Required Signature/Registered Agent

02-22-11

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.

Carol Liechty

Required Signature/Incorporator

2-21-11

Date