

P11000020908

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

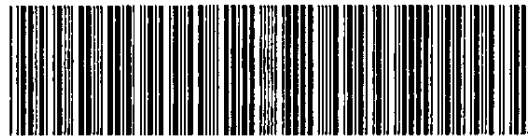
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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J. Shivers MAR 03 2011

COVER LETTER

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

SUBJECT: Liston Masonry Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and check for:

☐

\$70.00
Filing Fee

☒

\$78.75
Filing Fees &
Certificate of Status

☐

\$78.75
Filing Fee
& Certified Copy

☐

\$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: David Liston
Name (Printed or typed)

11731 NE 188th CT
Address

LAKE Butler, FL 32054
City, State & Zip

386-752-4576
Daytime Telephone number

diedhardchief58@yahoo.com
Email Address: (to be used for future annual report notification)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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

Division of Corporations
Tallahassee Florida

February 22, 2011

To Whom It May Concern:

I am requesting that my corporation name of Liston Masonry, Inc
Be released and I do not retain the name effective immediately.

This is a unanimous choice by the stockholders.

Thank you,

Dege David Liston/ml

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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:

Liston Masonry Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

mailing address, if different is:

11731 NE 188th Ct
LAKE BUTLER FL 32054

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:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTIONS

Name and Title:

PRES - DAVID Liston

Name and Title:

Address:

11731 NE 188th Ct
LAKE BUTLER FL
32054

Address:

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:

DAVID Liston

Address:

11731 NE 188th Ct
LAKE BUTLER FL 32054

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

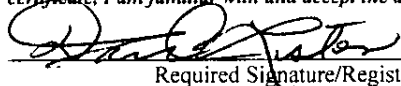
Name:

Nettie Davis

Address:

846 SW MAIN Blvd
LAKE CITY FL 32025

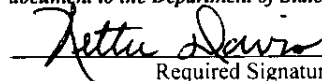
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

2/23/11
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.



Required Signature/Incorporator

2/23/11
Date

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