

P110000054094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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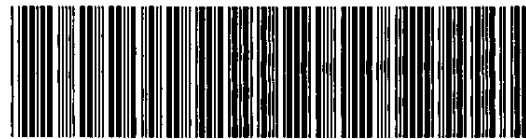
(Business Entity Name)

(Document Number)

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

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## COVER LETTER

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

SUBJECT: Lake City Plumbing, 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: Roger Whiddon

Name (Printed or typed)

295 NW Commons Loop, Suite 115-262

Address

Lake City, FL 32055

City, State & Zip

386-754-7367

Daytime Telephone number

roger@whiddonconstruction.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)

**ARTICLE I NAME**

The name of the corporation shall be: Lake City Plumbing, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
295 NW Commons Loop  
Suite 115-262  
Lake City, FL 32055

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose for which the corporation is organized is for the transaction of any and all lawful business for which corporations may be incorporated under the laws of the State of Florida, as they may be amended from time to time.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000 common shares with a par value of \$1.00

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

Name and Title: Roger D. Whiddon, PT  
Address: 295 NW Commons Loop  
Suite 115-262  
Lake City, FL 32055

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

Name and Title: Kennith E. Keen, VPS  
Address: 9323 S State Road 121  
Macclenny, FL 32063

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: Roger Whiddon  
Address: 295 NW Commons Loop, Suite 115-262  
Lake City, FL 32055

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Roger Whiddon  
Address: 295 NW Commons Loop, Suite 115-26  
Lake City, FL 32055

*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*

RW Whiddon

Required Signature/Registered Agent

6/03/2011

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.*

RW Whiddon

Required Signature/Incorporator

6/03/2011

Date

DEPARTMENT OF STATE  
DIVISION OF STATE  
REGISTRATION & PERMITS

11 JUN - 7 PM 12:14

APPROVED  
2/10