

PI1000057407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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2011 JUN 20 PM 2:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SC
6-21-11

COVER LETTER

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

SUBJECT: Simply The Best Home and General Contracting Service 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: Bobby R. Downs

Name (Printed or typed)

P. O. Box 110781

Address

Palm Bay FL 32911

City, State & Zip

321-723-5745

Daytime Telephone number

simplythebest@cfl.rr.com

E-mail address: (to be used for future annual report notification)

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

RECEIVED
TALLAHASSEE, FL 32314

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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: **Simply The Best Home and General Contracting Service Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
571 San Antonio Ave SW
Palm Bay FL 32908

Mailing address, if different is:
P O Box 110781
Palm Bay FL 32911

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Home Improvements

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Bobby R Downs/Director**
Address: **571 San Antonio Ave Sw**
Palm Bay FL 32908

Name and Title: _____
Address: _____

Name and Title: **Denell Hastings/Director**
Address: **324 Paunton Road**
Palm Bay FL 32908

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: **Bobby R Downs**
Address: **571 San Antonio Ave SW**
Palm Bay FL 32908

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Bobby R Downs**
Address: **571 San Antonio Ave SW**
Palm Bay FL 32908

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SECRETARY OF STATE
TALLAHASSEE FL 32304

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

6-17-2011
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.


Required Signature/Incorporator

6-17-2011
Date