

P11000067125

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

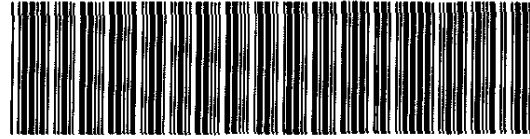
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100210077441

07/25/11--01038--018 **70.00

FILED
11 JUL 25 PM 2:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
7/26

COVER LETTER

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

SUBJECT: **STONEBURNER COMPANIES 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: **KEVIN L. STONEBURNER**

Name (Printed or typed)

465 BAYFRONT PLACE

Address

NAPLES, FL 34102-6454

City, State & Zip

239-649-8700

Daytime Telephone number

lulunaplesfl@aol.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 STONEBURNER COMPANIES INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
465 BAYFRONT PLACE
NAPLES, FL 34102-6454

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
REAL ESTATE TRANSACTIONS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KEVIN L. STONEBURNER
Address: PRESIDENT
465 BAYFRONT PLACE
NAPLES, FL 34102

Name and Title: KEVIN L. STONEBURNER
Address: SECRETARY
465 BAYFRONT PLACE
NAPLES, FL 34102

Name and Title: KEVIN L. STONEBURNER
Address: VICE PRESIDENT
465 BAYFRONT PLACE
NAPLES, FL 34102

Name and Title: _____
Address: _____

Name and Title: KEVIN L. STONEBURNER
Address: TREASURER
465 BAYFRONT PLACE
NAPLES, FL 34102

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: N. REX ASHLEY, P.A.
Address: 1044 CASTELLO DRIVE, #106
NAPLES, FL 34103

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: KEVIN L. STONEBURNER
Address: 465 BAYFRONT PLACE
NAPLES, FL 34102

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

N. REX ASHLEY, P.A.
Required Signature/Registered Agent

JULY 20, 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.

KEVIN L. STONEBURNER
Required Signature/Incorporator

JULY 20, 2011

Date

FILED
11 JUL 25 PM 2:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA