

PI1000074671

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

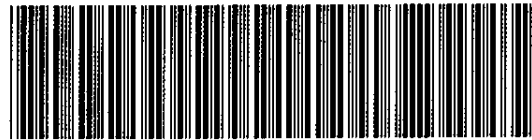
(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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08/08/11--01041--005 **78.75

17 AUG - 8 PM 2:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
FILED

COVER LETTER

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

SUBJECT: A & B DELIVERY OF NW FLA 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: JOSEPH AARON FOUNTAIN
Name (Printed or typed)

LUNNIE J.A.P.
5498 LONNIE BARNES RD
Address

BAKER, FL 32531
City, State & Zip

850-585-8823
Daytime Telephone number

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

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 9, 2011

JOSEPH AARON FOUNTAIN
5498 LUNNIE BARNES RD
BAKER, FL 32531

SUBJECT: A & B DELIVERY OF NW FLA INC.
Ref. Number: W11000041616

We have received your document for A & B DELIVERY OF NW FLA INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the name of the corporation in Article 1.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 911A00018708

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:

Delivery
~~A & B Deliveries~~ of NWFLA INC
JAP

ARTICLE II PRINCIPAL OFFICE

JAP Principal street address
5498 LUNNIE BARNES RD
BAKER, FL 32531

Mailing address, if different is:
5498 LUNNIE BARNES RD
BAKER, FL 32531

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any & all Lawful Business

Effective date: August 1, 2011

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joseph Aaron Fountain - Pres.	Name and Title: _____
Address: 5498 Lunnie Barnes Rd	Address: _____
Baker, FL 32531	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Joseph Aaron Fountain
Address: 5498 Lunnie Barnes Rd
Baker, FL 32531

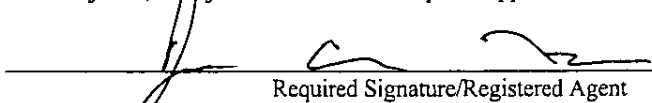
ARTICLE VII INCORPORATOR

The name and address of the incorporator is:

Name: Joseph Aaron Fountain
Address: 5498 Lunnie Barnes Rd
Baker, FL 32531

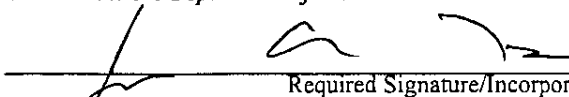
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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

8-1-11
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

8-1-11
Date