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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Burch SEP 19 2011

No C007

## COVER LETTER

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

SUBJECT: Box Stock Project, 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: Judith A. Sims

Name (Printed or typed)

3994 NW 36th Loop

Address

Jennings, FL 32053

City, State & Zip

386-938-4211

Daytime Telephone number

sims1@windstream.net

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** Box Stock Project, Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
3994 NW 36th Loop  
Jennings, FL 32053

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
import and distribution of products

**ARTICLE IV SHARES**

The number of shares of stock is: 2

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

Name and Title: Jimmy L. Sims, President  
Address: 3994 NW 36th Loop  
Jennings, FL 32053

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

Name and Title: Judith A. Sims, V. President  
Address: 3994 NW 36th Loop  
Jennings, FL 32053

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: Jimmy L. Sims  
Address: 3994 NW 36th Loop  
Jennings, FL 32053

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Judith A. Sims  
Address: 3994 NW 36th Loop  
Jennings, FL 32053

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

Jimmy L. Sims  
Required Signature/Registered Agent

9/15/11  
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.

Judith A. Sims  
Required Signature/Incorporator

9/15/11  
Date

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DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA