P12000021170

(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

400216057914

01/12/12--01004--015 **78.75

FILED
12 MAR -1 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W12-2590

03/02/12

RECEIVED
12 MAR -1 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 17, 2012

KYLE W. SPOFFORD
PO BOX 353
SUMERFIELD, FL 34492

SUBJECT: SPOFFORD'S LAWN MAINTENANCE INC.
Ref. Number: W12000002590

We have received your document for SPOFFORD'S LAWN MAINTENANCE 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):

You failed to make the correction(s) requested in our previous letter.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 312A00001020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
12 FEB 16 PM 3:55
DIVISION OF CORPORATIONS

February 3, 2012

KYLE W. SPOFFORD
PO BOX 353
SUMERFIELD, FL 34492

SUBJECT: SPOFFORD'S LAWN MAINTENANCE INC.
Ref. Number: W12000002590

We have received your document for SPOFFORD'S LAWN MAINTENANCE 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):

It appears that the word MAINTANCE in the name of this entity is misspelled. If this misspelling was intentional, simply resubmit the document with the word spelled MAINTANCE. If you did not misspell this word intentionally, please correct the spelling to read MAINTENANCE and resubmit the document for processing.

You failed to make the correction(s) requested in our previous letter.

The title(s) in the officer/director field(s) is/are not acceptable.Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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) 245-6949.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 312A00001020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
12 FEB -2 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

January 25, 2012

KYLE W. SPOFFORD
PO BOX 353
SUMERFIELD, FL 34492

*** 2ND MAILING ***

SUBJECT: SPOFFORD'S LAWN MAINTENANCE INC.
Ref. Number: W12000002590

We have received your document for SPOFFORD'S LAWN MAINTENANCE 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 complete Article(s) I -- Name of the Corporation.

The title(s) in the officer/director field(s) is/are not acceptable.Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

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) 245-6949.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 312A00001020

COVER LETTER

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

SUBJECT: Spofford's lawn Maintenance 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: Kyle W. Spofford
Name (Printed or typed)

41 Juniper Pass Drive
Address

Ocala FL 34480
City, State & Zip

352-299-5151
Daytime Telephone number

SpoffordlandScapeINC@gmail.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: Spofford's lawn Maintenance Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address
41 Juniper Pass Dr
Ocala FL 34480

Mailing address, if different is:
Po Box 353
Sumerfield FL 34492

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
LAWN Maintenance

ARTICLE IV SHARES
The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS
Name and Title: Kyle Spofford President
Address: 41 Juniper Pass Dr
Ocala FL 34480

Name and Title:
Address:

Name and Title:
Address:

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: Kyle Spofford
Address: 41 Juniper Pass Dr
Ocala FL 34480

ARTICLE VII INCORPORATOR
The name and address of the Incorporator is:
Name: Kyle Spofford
Address: 41 Juniper Pass Dr
Ocala FL 34480

FILED
12 MAR -1 PM 2:29
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 — Date: 1-8-12

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 — Date: 1-8-12