

P12000025589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

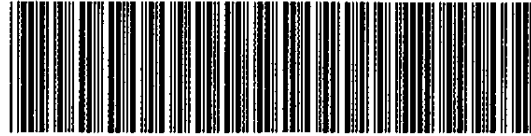
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800224470258

03/14/12--01019--018 **78.75

FILED
12 MAR 14 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
3/15/12

COVER LETTER

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

SUBJECT: TOP PRIORITY LAND SURVEYORS 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: LORI WAINWRIGHT

Name (Printed or typed)

11111-70 SAN JOSE BLVD. #177

Address

JACKSONVILLE, FL. 32223

City, State & Zip

904-625-2005

Daytime Telephone number

TOPPRIORITYLANDSURVEYORS@YAHOO.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:

TOP PRIORITY LAND SURVEYORS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

11111-70 SAN JOSE BLVD. #177
JACKSONVILLE, FL 32223

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PREFORM LAND SURVEYS

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LORI WAINWRIGHT (PRES)

Address: 11111-70 SAN JOSE BLVD. #177
JACKSONVILLE, FL 32223

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: LORI WAINWRIGHT

Address: 11111-70 SAN JOSE BLVD. #177
JACKSONVILLE, FL 32223

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LORI WAINWRIGHT

Address: 11111-70 SAN JOSE BLVD. #177
JACKSONVILLE, FL 32223

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

Lori Wainwright

Required Signature/Registered Agent

3/12/12
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.

Lori Wainwright

Required Signature/Incorporator

3/12/12
Date

FILED
12 MAR 14 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA