

P/2000066426

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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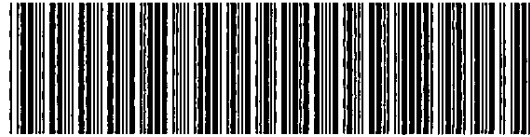
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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12 JUL 30 PM 3:55
SULLY, STATE
TALLAHASSEE, FLORIDA

h 07/31/12

COVER LETTER

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

SUBJECT: Garage Door Service & Repair of the Treasure Coast, 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: Gregory M Barnes
Name (Printed or typed)

1065 Harbor Island Dr
Address

Vero Beach, Florida 32967
City, State & Zip

336-312-7458
Daytime Telephone number

garagedoorsoftc@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: **Garage Door Service & Repair of the Treasure Coast, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1065 Harbor Island Ln
Vero Beach, Florida 32967

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales and service of garage doors and retractable awnings.

ARTICLE IV SHARES

The number of shares of stock is: **10,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Gregory M. Barnes / President
Address: 1065 Harbor Island Ln
Vero Beach, Florida 32967

Name and Title: _____
Address: _____

Name and Title: Mary I. Barnes / Vice President
Address: 1065 Harbor Island Dr
Vero Beach, Florida

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: Gregory M Barnes
Address: 1065 Harbor Island Ln
Vero Beach Florida 32967

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Gregory M Barnes
Address: 1065 Harbor Island Ln
Vero Beach, Florida 32967

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

7-25-2012

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

7-25-2012

Date

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12 JUL 30 PM 3:55
CLERK OF STATE
TALLAHASSEE, FLORIDA