

P12000074288

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

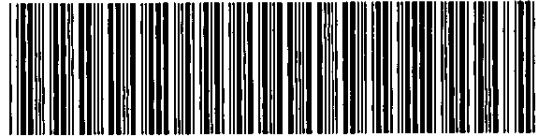
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700238196607

08/30/12--01002--002 **70.00

FILED
12 AUG 30 AM 10:22
TALLAHASSEE, FLORIDA
CLERK OF COURT

FILED
12 AUG 30 AM 10:39
TALLAHASSEE, FLORIDA
CLERK OF COURT

gr 8/30/12

COVER LETTER

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

SUBJECT: Bill Joyce Custom Construction 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: (Bill Joyce) William A Joyce Jr
Name (Printed or typed)

3223 BLACK GOLD TR.
Address

TALLAHASSEE, FL 32309
City, State & Zip

850 933 7301
Daytime Telephone number

Bill Joyce Construction @ COMCAST.NET
E-mail address: (to be used for future annual report notification)

FILED
12 AUG 30 AM 10:39
TALLAHASSEE, FLORIDA

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: Bill Joyce Custom Construction, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

3223 BLACK GOLD TR.
TAM. FL 32309

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

RESIDENTIAL & COMMERCIAL CONSTRUCTION

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: William A Soule / PRES
Address: 3223 BLACK GOLD TR.
TAM. FL 32309

Name and Title: PRESIDENT
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: WILLIAM A SOULE JR.
Address: 3223 BLACK GOLD TR
TAM. FL 32309

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: William A Soule Jr
Address: 3223 BLACK GOLD TR
TAM. FL 32309

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

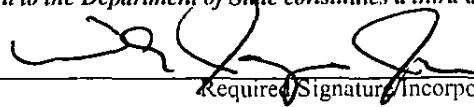


Required Signature/Registered Agent

8/30/12

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.



Required Signature/Incorporator

8/30/12

Date

FILED
12 AUG 30 AM 10:39
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA