

PI 2000079845

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

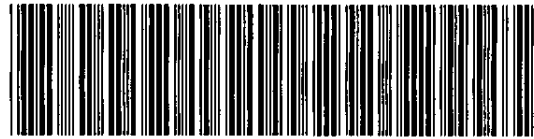
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/19/12--01002--004 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 19 AM 11:00

Ps 9/20/12

COVER LETTER

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

SUBJECT: Bob's Cabinets 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: Sandra Proctor

Name (Printed or typed)

26025 Mitchel Way

Address

Eustis, FL 32736

City, State & Zip

352-357-2230

Daytime Telephone number

bobcabinets@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: **BOB'S CABINETS INC.**

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DIVISION OF CORPORATIONS

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ARTICLE II PRINCIPAL OFFICE

Principal street address
26025 Mitchel Way
Eustis, FL 32736

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
woodworking, cabinetry

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Sandra Proctor, President
Address: 26025 Mitchel Way
Eustis, FL 32736

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: Sandra Proctor
Address: 26025 Mitchel Way
Eustis, FL 32736

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Sandra Proctor
Address: 26025 Mitchel Way
Eustis, FL 32736

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

Sandra Proctor

Required Signature/Registered Agent

9/14/12
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.

Sandra Proctor

Required Signature/Incorporator

9/14/12
Date