

P12000079971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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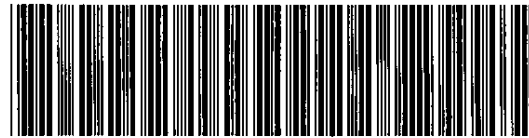
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
12 SEP 17 PM 2:08

9/20/12

COVER LETTER

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

SUBJECT: Home Source Complete Home 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: Donna D. Wooten
Name (Printed or typed)

10305 Marchmont Ct.
Address

Tampa, FL 33626
City, State & Zip

(813) 449-0554
Daytime Telephone number

donna_wooten813@hotmail.com
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 SEP 17 PM 2:09

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: HOME SOURCE COMPLETE HOME MAINTENANCE, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
10305 Marchmont Ct.
Tampa, FL 33626

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Donna Klooten - Owner
Address: 10305 Marchmont Ct.
Tampa, FL 33626

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: Donna Klooten
Address: 10305 Marchmont Ct.
Tampa, FL 33626

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Donna Klooten
Address: 10305 Marchmont Ct.
Tampa, FL 33626

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

Donna D. Wooten

Required Signature/Registered Agent

Donna D. Wooten

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.

Donna D. Wooten

Required Signature/Incorporator

Donna D. Wooten

9/14/12

Date

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