

P120000086174

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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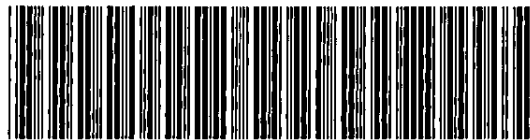
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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## COVER LETTER

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

SUBJECT: Ellison and Hunt Restoration and Construction  
(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: John Ellison  
Name (Printed or typed)

5005 San Jose Blvd.  
Address

Jacksonville, Florida 32207  
City, State & Zip

917-541-8406  
Daytime Telephone number

bigcityprodetailing@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: Ellison & Hunt Restoration and Construction Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

5005 San Jose Blvd.  
Jacksonville, FL 32207

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:

100

Effective Jan. 1, 2013

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: John Ellison / President

Address: 5005 San Jose Blvd.  
Jacksonville, FL 32207

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: Ed Hunt / Vice President

Address: 1415 North Pearl St.  
Jacksonville, FL 32206

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: Tom Diamond

Address: 640 Eugenia St. #Apt 202  
Tallahassee, FL 32310

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: John Ellison

Address: 5005 San Jose Blvd.  
Jacksonville, FL 32207

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

10/11/12  
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

10/11/12  
Date

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