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(Requestor's Name)

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(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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TALLAHASSEE FLORIDA

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## COVER LETTER

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

SUBJECT: LINDSON BUILDERS, INC. OF TALLAHASSEE  
(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: ROBERT Y. FERNANDEZ  
Name (Printed or typed)

2529 FL-GA  
Address

HAWANA, FL 32333  
City, State & Zip

850-980-4444  
Daytime Telephone number

RF@TALSTAR.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: **KINGDOM BUILDERS, INC. of TALLAHASSEE**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

**2529 FL-GA - HWY  
HAVANA, FL 32333**

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **CONSTRUCT & CONSULT**

**ARTICLE IV SHARES**

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

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

Name and Title: **ROBERT V. FERNANDEZ P.** Name and Title: \_\_\_\_\_

Address: **2529 FL-GA HWY** Address: \_\_\_\_\_

**HAVANA, FL 32333**

Name and Title: **SUSAN H. FERNANDEZ V.P.** Name and Title: \_\_\_\_\_

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

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

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

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: **ROBERT FERNANDEZ**

Address: **2529 FL-GA - HWY  
HAVANA, FL 32333**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **ROBERT FERNANDEZ**

Address: **2529 FL-GA HWY  
HAVANA, FL 32333**

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

Date

**10 DEC 12**

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

Date

**10 DEC 12**

**FILED  
12 DEC 10 PM 2:33  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA**