

P12 000103473

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

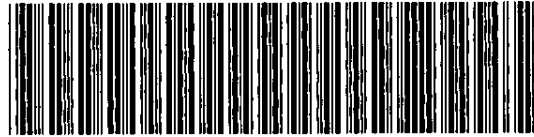
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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COVER LETTER

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

SUBJECT: LAWHON'S BODY SHOP 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: LAWHON'S BODY SHOP INC
Name (Printed or typed)

4185 WOODVILLE HWY
Address

TALLAHASSEE FLORIDA 32305
City, State & Zip

850 877-1216
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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TALLAHASSEE, FLORIDA

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:

Lawhon's Body Shop Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

4185 Woodville Hwy
Tallahassee Florida
32305

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Do Lawful work on Automobiles in The state of Florida

ARTICLE IV SHARES

The number of shares of stock is:

100 = \$1 Par Value
shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Howard Dale Lawhon

Address: 4185 Woodville Hwy

P Tallahassee Florida
32305

Name and Title:

Address:

Name and Title: Donald Wayne Lawhon

Address: 1024 Maradon #6

V/P Tallahassee Florida
32305

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: Donald Wayne Lawhon

Address: 1024 Maradon #6
Tallahassee Florida 32305

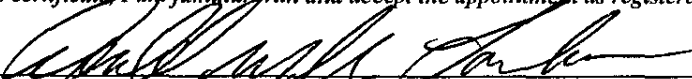
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Donald Wayne Lawhon

Address: 1024 Maradon #6
Tallahassee Florida 32305

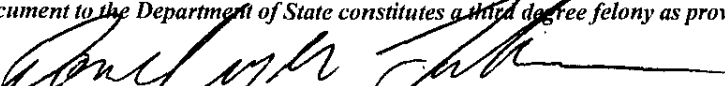
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

12-26-12

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

12-26-12

Date

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