

P/3000006342

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

✓ 01/18/13

COVER LETTER

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

SUBJECT: PROFESSIONAL HOME MAINTENANCE AND REPAIR SERVICES, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: MICHAEL SHADLE
Name (Printed or typed)
600 AUTUMN FERN LANE
Address
DELAND, FL 32720
City, State & Zip
386-232-1133
Daytime Telephone number
PHMRSINC@GMAIL.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: PROFESSIONAL HOME MAINTENANCE AND REPAIR SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

600 AUTUMN FERN LANE
DELAND, FL 32720

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE GENERAL NATURE OF BUSINESS TO BE TRANSACTED
BY THIS CORPORATION IS REAL ESTATE MAINTENANCE
AND REPAIR, AND ANY OTHER BUSINESS PERMITTED
UNDER THE LAWS OF THE UNITED STATES OF AMERICA
AND OF THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: MICHAEL SHADLE, PRESIDENT

Name and Title:

Address 600 AUTUMN FERN LANE

Address:

DELAND, FL 32720

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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TALLAHASSEE, FLORIDA

(conti.)

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: MICHAEL SHADLE, PRESIDENT
Address: 600 AUTUMN FERN LANE
DELAND, FL 32720

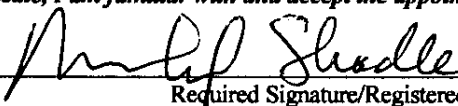
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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

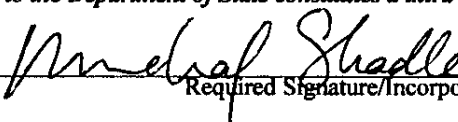
Name: MICHAEL SHADLE, PRESIDENT
Address: 600 AUTUMN FERN LANE
DELAND, FL 32720

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

01/12/13
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

01/12/13
Date