

P130000033877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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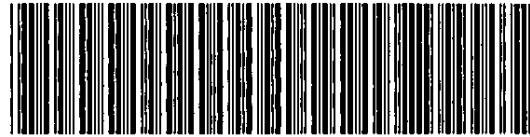
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

1/4

## COVER LETTER

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

SUBJECT: JL HANDY, 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: JAMES LITTLE  
Name (Printed or typed)

32137 HOLOPAW TR.  
Address

SORRENTO, FL 32776  
City, State & Zip

352-263-6759  
Daytime Telephone number

STEVETOIGO@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: JL HANDY, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

32137 HOLOPAW TR.

SORRENTO, FL, 32776

13 APR 12 PM 1:57  
Mailing address, if different is:  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: A PROFESSIONAL CORPORATION  
TO DO CONSTRUCTION WORK

**ARTICLE IV SHARES**

The number of shares of stock is: 500

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

Name and Title: JAMES LITTLE PD Name and Title:

Address: 32137 HOLOPAW TR Address:  
SORRENTO, FL 32776

Name and Title: Name and Title:

Address: Address:

Name and Title: Name and Title:

Address: Address:

(conti.)

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13 APR 12 PM 1:57

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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: JAMES LITTLE

Address: 32137 HOLOPAW TR  
SORRENTO, FL 32776

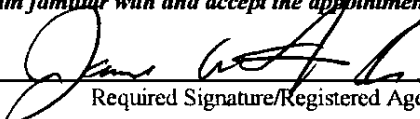
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: JAMES LITTLE

Address: 32137 HOLOPAW TR  
SORRENTO, FL 32776

*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

4-9-2013  
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

4-9-2013  
Date