

P/3000073157

Steve Skipper
(Requestor's Name)

521 Chap Chason Rd
(Address)

Quincy FL 32352
(Address)

850-5457374
(City/State/Zip/Phone #)

☒ PICK-UP ☒ WAIT ☐ MAIL

M. S. Builders Inc
(Business Entity Name)

(Document Number)

Certified Copies ☒ Certificates of Status ☐

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W13-49374

K 09/06/13

ARTICLES OF INCORPORATION
Of
L. M. S. BUILDERS, INC.

I, the undersigned, for the purpose of forming a corporation under the Florida General Corporation Act, do hereby adopt the following Articles of Incorporation:

ARTICLE I.

Name of Corporation

The name of this corporation shall be L. M. S. Builders, Inc.

ARTICLE II

PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be 521 Chaf Chason Road, Quincy, Florida 32352.

ARTICLE III.

Term of Existence

The duration of the corporation shall be perpetual. This corporation begins its corporate existence the same date as the filing of these articles of incorporation with the Florida Department of State.

ARTICLE IV.

General Purpose

This corporation may transact any or all lawful business for which corporations may be incorporated under the laws of the State of Florida and shall have those general powers conferred upon corporations under the laws of the State of Florida.

ARTICLE V.

Capital Stock

The aggregate number of shares of capital stock which this corporation is authorized to issue is Five Hundred (500) shares. Such shares shall be of a single class, and shall have a par value of One Dollar (\$1.00) per share.

ARTICLE VI.

Registered Office and Registered Agent

The street address of the initial registered office of this corporation in the State of Florida is 521 Chaf Chason Road, Quincy, Florida 32352. The initial registered agent for this corporation at its registered office is Micky Skipper. The Board of Directors shall have the power to establish branch offices, and to move the registered office of the corporation to any other address in Florida.

ARTICLE VII.

Board of Directors

The number of directors of the initial Board of Directors of this corporation is one (1). The name and address of the member of the initial Board of Director of this corporation is as follows:

Micky Skipper
521 Chaf Chason Road
Quincy, Florida 32352

ARTICLE VIII.

Incorporator

The following is the name and address of the incorporator of this corporation:

Micky Skipper
521 Chaf Chason Road
Quincy, Florida 32352

IN WITNESS WHEREOF, the undersigned has made and subscribed to these Articles of Incorporation at Tallahassee, Florida, on this 4th day of September, 2013.

Micky Skipper (SEAL)
Micky Skipper

STATE OF FLORIDA)
COUNTY OF LEON)

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared Micky Skipper who is (✓) personally known or who furnished the following as identification: _____ and known to me to be the person described as incorporator in and who executed the foregoing Articles of Incorporation, and acknowledged before me that he subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the county and state named above this 4th day of September 2013.

Mary R. Kneese
Notary Public
My Commission expires:



MARY R. KNEESE
MY COMMISSION # EE 873718
EXPIRES: May 25, 2017
Bonded Thru Budget Notary Services

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

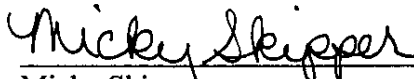
Pursuant to the provisions of Section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

The name of the corporation is:

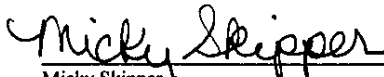
L. M. S. BUILDERS, INC.

The name and address of the registered agent and office is:

Micky Skipper
521 Chaf Chason Road
Quincy, Florida 32352


Micky Skipper


Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

 Date: 9-4-2013
Micky Skipper

STATE OF FLORIDA)
COUNTY OF LEON)

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgments, personally appeared Micky Skipper, who is (✓) personally known or who furnished the following as identification: _____ and to me known and known to me to be the person described as registered agent in and who executed the foregoing and acknowledged before me that he subscribed to same.

WITNESS my hand and official seal in the County and State named above this 4th day of September 2013.


Notary Public
My Commission expires:



MARY R. KNEECE
MY COMMISSION # EE 873719
EXPIRES: May 25, 2017
Bonded Through Budget Notary Services