

P13000087180

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

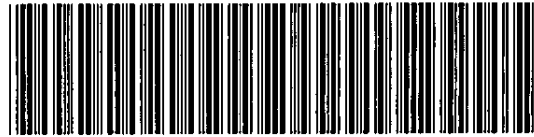
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APPROVED
FILED
13 OCT 24 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10/24/13

COVER LETTER

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

SUBJECT: Coy Davis Appraisal 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
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: Coy Davis
Name (Printed or typed)

56301 Nassau Oaks Dr.
Address

Callahan, Florida 32011
City, State & Zip

904-732-0390
Daytime Telephone number

cdavisappr@yahoo.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 OCT 24 AM 11:38

APPROVED
AND
FILED

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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: Coy Davis Appraisal Service 93 OCT 24 AM 11:38

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

56301 Nassaw Oaks Dr.

Callahan Fl 32011

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for profit Appraisal Services

ARTICLE IV SHARES

The number of shares of stock is: 500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Coy Davis (President)</u>	Name and Title:	<u>Amanda I. Perry / Vice President</u>
Address	<u>56301 Nassaw Oaks Dr.</u>	Address:	<u>56301 Nassaw Oaks Dr.</u>
	<u>Callahan Fl 32011</u>		<u>Callahan Fl 32011</u>

Name and Title:	_____	Name and Title:	_____
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Address	_____	Address:	_____
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Name and Title:	_____	Name and Title:	_____
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Address	_____	Address:	_____
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APPROVED
AND
FILED (cont.)

13 OCT 24 AM 11:38

Name and Title: _____	Name and Title: _____
Address _____	Address: _____
_____	_____
_____	_____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Coy Davis
Address: 56301 Nassau Oaks Dr.
Callahan FL 32011

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Coy Davis
Address: 56301 Nassau Oaks Dr.
Callahan FL 32011

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	<u>10-24-13</u> Date
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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	<u>10-24-13</u> Date
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