

P 140000006740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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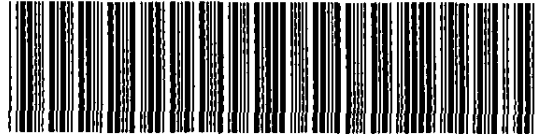
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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1/24/14

COVER LETTER

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

SUBJECT: Northwest Florida Electrical, 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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Clyde Nickyson
Name (Printed or typed)

271 Bermuda Road
Address

Tallahassee, Florida 32312
City, State & Zip

(850) ~~850~~ 508-6775
Daytime Telephone number

None
E-mail address: (to be used for future annual report notification)

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

I Clyde Nickyson have no
Intentions of Reinstating "Northwest Florida
Electrical, inc." DOC# P11000097475 and
I Release the name.

Clyde Nickyson

1-24-14

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SECRETARY OF STATE
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: Northwest Florida Electrical, inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

271 Bermuda Rd.

Tallahassee FL 32312

Mailing address, if different is:

271 Bermuda Road
Tallahassee, FL 32312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Electrical Services

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:

Clyde Nickyson (P)

Name and Title:

NA

Address

271 Bermuda Rd.

Address:

Tallahassee FL 32312

Name and Title:

None

Name and Title:

NA

Address

Address:

Name and Title:

None

Name and Title:

NA

Address

Address:

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(cont)

Name and Title: None Name and Title: NA
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Clyde Nickyson
Address: 271 Bermuda Road
Tallahassee, FL 32312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Clyde Nickyson
Address: 271 Bermuda Road
Tallahassee, FL 32312

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

Clyde Nickyson
Required Signature/Registered Agent

1-24-14
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.

Clyde Nickyson
Required Signature/Incorporator

January 24, 2014
Date

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