## P1400000 8939

(Requ	uestor's Name)	
(Addi	ress)	
(Addr	ess)	
(City/	State/Zip/Phone	e#)
PICK-UP	MAIT	MAIL.
(Busi	ness Entity Nan	ne)
(Doce	ument Number)	·
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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## **COVER LETTER**

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

SUBJECT: ALL DECKED OUT OF NWFL INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

enciosed are an orig	inai and one (1) copy of the ar	ticles of incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		i additional ot	A I RECUIRED I

FROM:	Christopher M Hughes
	Name (Printed or typed)
	78 Binnacle Lane
	Address
	Shalimar FL 32579
	City, State & Zip
	(850) 305-7643
	Daytime Telephone number
	pittbillservicesllc@yahoo.com  E-mail address: (to be used for future annual report notification)
	13-man 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 NAM The name of the corporati	E ALL DECKED C	OUT OF N	WFL INC
	ICIPAL OFFICE Principal street address	N	Mailing address, if different is:
Shalimar FL			
		-	
ARTICLE III PURI	POSE ne corporation is organized is:	ction rem	odeling and renovation
	eluding exterior coating		
pool deck co		o, gonore	armamonario, and
poor deek ee	dungs.		
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	·	
			14 JAN 2
			4 J/N 24
			21
			꾶
ARTICLE IV SHA	RES tock is: 100 shares		
The manager of states of t			•
ARTICLE V INIT	Christopher M Hughes Bresident	<u>s</u>	Christopher M Hughes Director
Name and Title		Name and Title:	
Address	78 Binnacle Lane	Address:	78 Binnacle Lane
	Shalimar FL 32579		Shalimar FL 32579
N 1000	James T Higham, Vice President	N 1 T'41	James T. Higham, Director
	36 Maigs Drive		36 Meigs Drive
Address	Shalimar FL 32579	Address:	Shalimar FL 32579
		-	
Name and Title:		Name and Title	
Address		Address:	
		-	

Name and	Title:	Name and Title:	
Address		Address:	
	REGISTERED AGENT rida street address (P.O. Box NOT acceptable) of Patricia K. Hagan	the registered agent is:	
Name: Address:	1651 W Highway 90		
	Baker FL 32531-9330		TVID S
ARTICLE VII	INCORPORATOR		SECRETARY IVISION OF C
The name and add	Iress of the Incorporator is:		0,000
Name:	Christopher M Hughes, Director		공 문의 문의
Address:	78 Binnacle Lane		RATION RATION
	Shalimar FL 32579		50
	ed as registered agent to accept service of process m familiar with and accept the appointment as reg		lesignated in
Taluc	in K Llegan	January 20	0, 2014
	Required Signature/Registered Agent	Date	
	ment and affirm that the facts stated herein are t epartment of State constitutes a third degree felony		bmitted in a
05	January 20, 20		0, 2014
	Required Signature/Incorporator	Date	