

P/4000021659

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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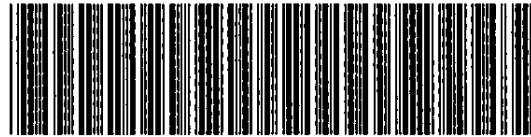
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
14 MAR -7 AM 9:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 03/11/14

COVER LETTER

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

SUBJECT: Black Creek Boat & RV Storage 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: Nora M. Evans
Name (Printed or typed)

320 Foxtail Ave.
Address

Middleburg, fl. 32068
City, State & Zip

904-282-0155 / 904-237-7944 cell.
Daytime Telephone number

bcbrrv@att.net
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: Black Creek Boat & RV Storage, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

320 Foxtail Ave.
Middleburg, Fla. 32068

- same -

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Outside Storage Area for boats & RV's.

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James C. Evans Name and Title: President

Address 9180 Max-Middleburg Rd. Address: _____
Baldwin, Fla. 32234

Name and Title: Nora M. Evans Name and Title: Vice President

Address 9180 Max-Middleburg Rd. Address: _____
Baldwin, Fla. 32234

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

(cont.)

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: Nora M. Evans
Address: 320 Foxtail Ave.
Middleburg, Fla. 32068

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Nora M. Evans
Address: 320 Foxtail Ave.
Middleburg, Fla. 32068

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TALLAHASSEE, FLORIDA

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

Nora M. Evans
Required Signature/Registered Agent

March 5, 2014
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.

Nora M. Evans
Required Signature/Incorporator

March 5, 2014
Date