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(Requestor's Name)

(Address)

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DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: JVD LAWN SERVICE, 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: Jean R Deliard

Name (Printed or typed)

3995 W MCNAB RD APT B206

Address

POMPANO BEACH, FL 33069

City, State & Zip

954 774 2692

Daytime Telephone number

jborjas@gafoods.com

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: JVD Lawn Service, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3995 w mc nab rd apt b206

pompano beach, fl 33069

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to cut and maintain lawns for profit

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: jean r deliard/president

Name and Title: _____

Address 3995 W Mcnab Rd apt b206

Address: _____

Pompano Beach, Fl 33069

Name and Title: Rebecca Deliard/Vicepresident

Name and Title: _____

Address 3995 W macnab Rd apt b206

Address: _____

Pompano beach, fl 33069

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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(conti.)

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: Jean R Deliard
Address: same as above

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jean r deliard
Address: same as above

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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

X 

Required Signature/Registered Agent

03/21/2014

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.



Required Signature/Incorporator

03/21/2014

Date