

PK 000039917

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only

B. 5/7/14



400257466664

04/10/14--01008--013 \*\*78.75

RECEIVED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAY -2 PM 12:10

**COVER LETTER**

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

SUBJECT: James Toombs 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: James Earl Toombs  
Name (Printed or typed)

12292 Villa Rd.  
Address

Springhill, FL 34609  
City, State & Zip

(813) 952-6083  
Daytime Telephone number

Jimmy Toombs 116 at AOL.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: James Toombs Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

12292 Villa Rd  
springhill, FL 34609

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Tile & Marble

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: James Toombs President Name and Title: \_\_\_\_\_

Address 12292 Villa Rd Address: \_\_\_\_\_  
Springhill, FL 34609

Name and Title: James Toombs Treasurer Name and Title: \_\_\_\_\_

Address 12292 Villa Rd Address: \_\_\_\_\_  
Springhill, FL 34609

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAY -2 PM 12:10

(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: James Toombs  
Address: 12292 Villa Rd,  
Springhill, FL 34609

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: James Toombs  
Address: 12292 Villa Rd,  
Springhill, FL 34609

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAY -2 PM 12:10

*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*

James Toombs  
Required Signature/Registered Agent

4-6-14  
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.*

James Toombs  
Required Signature/Incorporator

4-6-14  
Date