

P14000046285

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(Business Entity Name)

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14 MAY 27 PM 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2544

W14000030575

5/28/14

## COVER LETTER

ATX1

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

**SUBJECT:** NWWW 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:** CHARLES F. NORRIS JR.

Name (Printed or typed)

10499 MUDLAKE ROAD

Address

GLEN SAINT MARY, FL 32040

City, State & Zip

904 275-2295

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 MAY 27 PM 4: 47

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 14, 2014

CHARLES F. NORRIS, JR.  
10499 MUDLAKE ROAD  
GLEN SAINT MARY, FL 32040

SUBJECT: NORRIS WOOD WORKS CORP  
Ref. Number: W14000030575

RECEIVED  
14 MAY 27 AM 10:36  
TALLAHASSEE, FLORIDA

We have received your document for NORRIS WOOD WORKS CORP and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 614A00010400

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14 MAY 27 PM 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

NWW INC

ATX1

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED

14 MAY 27 PM 4:47

**ARTICLE I NAME**

The name of the corporation shall be: NWW INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
Mailing address, if different is:

10499 MUDLAKE ROAD

GLEN SAINT MARY, FL 32040

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Engage in the manufacture of furniture, to the extent permitted

by Florida Law or to carry on in any capacity any business or trade deemed legal in the State of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 100 \$1 Par Common

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

Name and Title: Charles F. Norris Jr., President

Name and Title: Terri L. Norris, Secretary

Address: 10499 Mudlake Road

Address: 10499 Mudlake Road

Glen Saint Mary, FL 32040

Glen Saint Mary, FL 32040

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

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

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

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

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

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

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

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

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: Charles F. Norris, Jr.

Address: 10499 Mudlake Road

Glen Saint Mary, FL 32040

**ARTICLE VII INCORPORATOR**The **name and address** of the Incorporator is:

Name: Charles F. Norris, Jr.

Address: 10499 Mudlake Road

Glen Saint Mary, FL 32040

*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*

*Charles F. Norris, Jr.*

Required Signature/Registered Agent

5-22-14

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.*

*Charles F. Norris, Jr.*

Required Signature/Incorporator

5-22-14

Date

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TALLAHASSEE, FLORIDA