

P14000047707

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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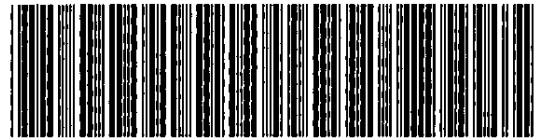
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUN -2 PM 1:56

REV

6/4/14

COVER LETTER

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

SUBJECT: Clearview Window Cleaning & Pressure Washing 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: Clearview Window Cleaning & Pressure Washing
Name (Printed or typed)

PO Box 2147

Address

Bunnell, FL 32110

City, State & Zip

386-586-6863

Daytime Telephone number

enjoyclearview@yahoo.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: Clearview Window Cleaning & Pressure Washing Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

4730 Butternut Avenue

PO Box 2147

Bunnell, Fl 32110

Bunnell, Fl 32110

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Window Cleaning & Pressure Washing

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ARTICLE IV SHARES

The number of shares of stock is: 1 Share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: John A. Stevens - President

Name and Title: Mary E. Stevens - Vice - President

Address PO Box 2147

Address: Po Box 2147

Bunnell, Fl 32110

Bunnell, Fl 32110

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(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: John A. Stevens

Address: 4730 Butternut Avenue
Bunnell, Fl 32110

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: John A. Stevens

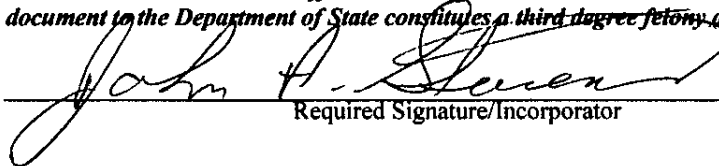
Address: PO Box 2147
Bunnell, Fl 32110

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


Required Signature/Registered Agent

5-28-14
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.


Required Signature/Incorporator

5-28-14
Date