

P14000047798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

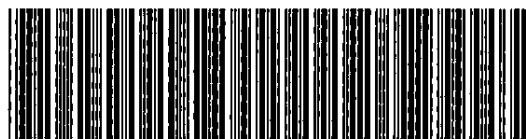
(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only

B 6/4/14



300260381223

06/02/14--01036--002 \*\*87.50

RECEIVED  
DIVISION OF CORPORATIONS  
14 JUN -2 PM 1:23

## COVER LETTER

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

SUBJECT: Barnes Trim Carpentry, 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: Kenneth L. Barnes  
Name (Printed or typed)

18301 Branch Rd.  
Address

Hudson, FL 34667  
City, State & Zip

(727) 534-6441  
Daytime Telephone number

Kennybarnes1974@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: Barnes Trim Carpentry, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

18301 Branch Rd.  
Hudson, FL 34667

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: a professional trim  
carpentry corp doing legal business  
in the state of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Kenneth L Barnes, Name and Title: \_\_\_\_\_

Address President, VP, Treasurer, Sec. Address: \_\_\_\_\_

18301 Branch Rd

Hudson, FL 34667

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

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

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

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

RECEIVED  
DIVISION OF CORPORATIONS  
14 JUN - 2 PM 1:23

(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: Kenneth L. Barnes  
Address: 18301 Branch Rd.  
Hudson, FL 34667

**ARTICLE VII INCORPORATOR**

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

Name: Kenneth L. Barnes  
Address: 18301 Branch Rd.  
Hudson, FL 34667

*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

5/21/14  
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

5/21/14  
Date

14 JUN -2 PM 1:23

DEPARTMENT OF STATE  
DIVISION OF CORPORATE AFFAIRS