P1400071767

(Re	questor's Name)				
(Address)					
(Add	dress)				
(Cit	y/State/Zip/Phone	e #)			
	☐ WAIT				
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only

2544-2553-6429-

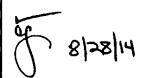
W14000026934 2556-



300259243973

04/25/14--01014--019 **87.50

14 AUG 27 MI ID: 47



COVER LETTER

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

SUBJECT: Sexton Construction (PROPOSED CORPOR.	1 Co. ate name – <u>must incl</u>	UDE SUFFIX)
Enclosed are an original and one (1) copy of the ar	ticles of incorporation an	d a check for:
□ \$70.00 □ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED
FROM: Tracy Sexton	ne (Printed or typed)	
3 East Story rd.	or (Common of Types)	
Winter Garden 34		
704-577-7237	, State & Zip Telephone number	SECRET FALLAR

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

tjsexton222@gmail.com

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

REDT TO

14 AUG 27 AH II: 26 FLORIDA DEPARTMENT OF STATE **Division of Corporations**

TALLAHASSEL, FLORIDA

July 21, 2014

SEUM.

NRACY SEXTON 3 EAST STORY ROAD WINTER GARDEN, FL 34784

SUBJECT: T.J. SEXTON CONSTRUCTION CO.

Ref. Number: W14000026934

We have received your document for T.J. SEXTON CONSTRUCTION CO. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following officer/director titleinformation. link for acceptable http://www.sunbiz.org/titledef.html.

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: 414A00015502



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 15, 2014

TRACY SEXTON 3 EAST STORY ROAD WINTER GARDEN, FL 34784

SUBJECT: T.J. SEXON CONSTRUCTION CO.

Ref. Number: W14000026934

We have received your document for T.J. SEXON CONSTRUCTION CO. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A corporation may not serve as its own registered agent. Please designate an individual or another active entity filed or registered with this office, having a Florida street address.

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: 414A00010542

14 AUG 27 MID 42
SCORETARY OF STATE
TALLAND SSEE FROM



RECEIVED

14 MAY -8 AN 11: 04

FLORIDA DEPARTMENT OF STATE Division of Corporations

ATE. JALLAHASSEE, FLORIDA

April 29, 2014

TRACY SEXTON 3 EAST STORY ROAD WINTER GARDEN, FL 34784

SUBJECT: SEXTON CONSTRUCTION CO.

Ref. Number: W14000026934

We have received your document for SEXTON CONSTRUCTION CO. and your check(s) totaling \$87.50. 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.

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director titleinformation. http://www.sunbiz.org/titledef.html.

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: 314A0000909

14 NUG 27 AN ID: 1/2

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

LE II PRI	NCIPAL OFFICE Principal street address	Mai	iling address, if different is:
st Story r	d.		
er Garde	n fl. 34787		
-		<u> </u>	
ose for which	POSE the corporation is organized is:	ction	三三 三三 三三 三三 三三 三三 三三 三三 三三 三 三 三 三 三 三
		,	
		, , , , , , , , , , , , , , , , , , , 	<u> </u>
		,,, ,,, ,, , , ,, ,,,,,,,,,,,,,,,,,,,	
			•
per of shares of	ARES 100		1
LE V INI Name and Titl	tial officers and/or director e: Tracy Sexton Owner		resident
ber of shares of	TIAL OFFICERS AND/OR DIRECTOR E: Tracy Sexton Owner 3 East Story Rd.	Name and Title:	resident
er of shares of	tial officers and/or director e: Tracy Sexton Owner		resident
ber of shares of LE V INI Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR Tracy Sexton Owner 3 East Story Rd. Winter Garden Fl. 34787	Address:	
LE V INI Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR Tracy Sexton Owner 3 East Story Rd. Winter Garden Fl. 34787	Address: Name and Title:	
ber of shares of LE V INI Name and Titl Address	TIAL OFFICERS AND/OR DIRECTOR Tracy Sexton Owner 3 East Story Rd. Winter Garden Fl. 34787	Address: Name and Title:	
LE V INI Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR Tracy Sexton Owner 3 East Story Rd. Winter Garden Fl. 34787	Address: Name and Title: Address:	
ber of shares of LE V INI Name and Title Address Name and Title Address	TIAL OFFICERS AND/OR DIRECTOR Tracy Sexton Owner 3 East Story Rd. Winter Garden Fl. 34787	Address: Name and Title: Address:	

Name and Title	IVACY J Sexton	Name and Title:	
Address		Address:	

		-	
	SISTERED AGENT Street address (P.O. Box NOT acceptable) of		foll
Address: 3	E. Story rd inter Garden Fl	34787	
ARTICLE VII INC	CORPORATOR		
The name and address	of the Incorporator is:		
Name:	Tracy Sexton		
Address:	3 East Story Rd.		
-	Winter Garden Fl. 34787	<u>-</u>	
	registered agent to accept service of process niliar with and accept the appointment as reg		
	Required Signature/Registered Agent	 	Date
	and affirm that the facts stated herein are timent of State constitutes a third degree felon Required Signature/Incorporator		
	Acquired Organizator moor portator		Date .

14 AUG 27 AN ID 42 SECRETARY OF STATE