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TALLAHASSEE FL 09106

COVER LETTER

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

SUBJECT: W HARRISON CARPET INSTALLATION, 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: TOMMY W. HARRISON

Name (Printed or typed)

8028 NUSSBAUM ROAD

Address

JACKSONVILLE FL 32210

City, State & Zip

904-219-0154

Daytime Telephone number

supsvc0702@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: W HARRISON CARPET INSTALLATION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

TOMMY W. HARRISON

8028 NUSSBAUM ROAD

JACKSONVILLE FL 32210

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: TOMMY W. HARRISON/PRESIDENT

Name and Title: _____

Address 8028 NUSSBAUM ROAD
JACKSONVILLE FL 32210

Address: _____

Name and Title: MICHAEL A. OLIVE/VICE-PRESIDENT

Name and Title: _____

Address 8028 NUSSBAUM ROAD
JACKSONVILLE FL 32210

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TALLAHASSEE FLORIDA

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: JOE D. JEFFERSON
Address: 5412 MORSE AVE
JACKSONVILLE FL 32244

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TOMMY W. HARRISON
Address: 8028 NUSSBAUM ROAD
JACKSONVILLE FL 32210

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

09/22/2014

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.

Tommy W Harrison
Required Signature/Incorporator

09/22/2014

Date