

P15000005698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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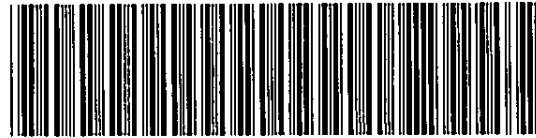
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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15 JAN 22 AM 11:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

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

15 JAN 22 AM 11:09

SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: THE CONTRACTOR Enterprises 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: DAVID BEVOWER
Name (Printed or typed)

2711 ALLEN RD TALLAHASSEE
Address

TALLAHASSEE FL 32312 #D-3
City, State & Zip

850 (559 70-67) - (850 510-28-07)
Daytime Telephone number

OTTOGEEVOWER@GMAIL.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 Professional Contractors Inc.

APPROVED
AND
FILED

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

15 JAN 22 AM 11:09

2711 ALLEN RD #D-3
TALLAHASSEE FL 32312

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESSES

ARTICLE IV SHARES

The number of shares of stock is:

4

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAVID GEUAWER P.

Name and Title:

Address

2711 ALLEN RD #D-3
TALLAHASSEE FL
32312

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

(conti.)

APPROVED
AND
FILED

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

15 JAN 22 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: DAVID GEVAUER
Address: 2711 ALLEN RD #D-3
TALLAHASSEE FL 32312

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: DAVID GEVAUER
Address: 2711 ALLEN RD #D-3
32312

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

x [Signature] Required Signature/Registered Agent 01/23/15 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.

x [Signature] Required Signature/Incorporator 01/23/15 Date