

P15000031177

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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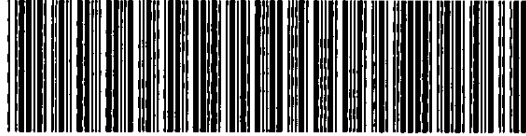
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 APR - 2 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/7/15

COVER LETTER

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

SUBJECT: Mockingbyrd 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
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: Herbert C. Wilson Jr.
Name (Printed or typed)
4964 White Sanderling Court
Address
Tampa, FL 33619
City, State & Zip
813 546 5581
Daytime Telephone number
mockingbyrd2015@gmail.com
E-mail address: (to be used for future annual report notification)

RECEIVED
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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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 Mockingbyrd Enterprises Inc.
The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE
Principal street address
4964 White Sanderling Court

Tampa, FL 33619

Mailing address different ~~is~~ is not _____
15 APR 92 PM 2:03

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: _____
Any and all lawful business

ARTICLE IV SHARES 2000
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President Herbert C. Wilson Jr.

Address 4964 White Sanderling Court

 Tampa, FL 33619

Name and Title: VP Derry E. Wilson

Address: 4964 White Sanderling Court

 Tampa, FL 33619

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

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: Derry E. Wilson
Address: 4964 White Sanderling Court
Tampa, FL 33619

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Herbert C. Wilson Jr.
Address: 4964 White Sanderling Court
Tampa, FL 33619

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

Derry E. Wilson

Required Signature/Registered Agent

3/30/15

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.

Herbert C. Wilson Jr.

Required Signature/Incorporator

3/30/15

Date

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TALLAHASSEE, FLORIDA