## P1500037835

(Requestor's Name)				
(Address)				
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

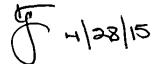
Office Use Only



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15 APR 23 PM 1: 45



## **COVER LETTER**

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

SUBJECT:	DOWHAND.	luc.		
	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the art	ticles of incorporation an	d a check for:	1
₩ \$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 CO	DPY REQUIRED	
				-
FROM: _N	NICHELE L. BOU	UMAN e (Printed or typed)		
	1515 LAN			
	JUPITER, FL. 3	5418	<u> </u>	5
	•	-State & Zip -Solb elephone number		APR 23
	Daytime Towns of the Color			
<u></u>	E-mail address: (to be use	ed for future annual report	notification)	l: 45

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)

	AME	BOWHAND	١	FILED
The name of the corp			111C.	15 APR 23 PM 1: 45
<u>ARTICLE II P</u>	RINCIPAL OFFICE Principal street ad			Mailing address if different is the one
No Bown	NAN			A LAND TE FLORIDA
10954-151		o .		
JULTER		•		
	•	<b>D</b>	-	•
The purpose for which		organized is:	ENERAL	CONSTRUCTION
			<del></del>	
<del></del>				
ARTICLE IV S	HARES			
The number of shares		DHARES		
	WWW. OFFICERS		one	
		AND/OR DIRECT	<u> </u>	
Name and T	itle: MICHELE	, \	Name and	Title:
Address		A LANE NO.	Address:	
	JUPITER	+ r 22744		
			<u> </u>	
	1000-	HALLO, VICE	fles.	``
Name and Ti		. ^		Title:
Address	1425 . C.		Address:	
	LAKAHATC	HEE FL. 134	<u>10</u>	
		•		
			- LEG FTP #8 A	11 ED
Name and Ti	tle: MICHARD	LAMWORD.	Name and	Title:
Address		HAT LAVE NO.		
	JULITER, F	_		
		, , , , , ,	<del></del>	

Address		Address:	
ARTICLE VI The name and Fl	REGISTERED AGENT orida street address (P.O. Box NOT accept	able) of the registered ag	gent is:
Name:	MICHELE L. DOWMAN		•
Address:	10054 - 151ST LANE		
Address.	JUPITER FL. 334		
	- 30111CL , 12: 33	110	
ARTICLE VII	INCORPORATOR		
The name and ad	Idress of the Incorporator is:		
Name:	MICHELE L. DOWMA	· ·	
Address:	10954-15/5T LANE	No.	
	JUPITER FL. 334		
		110	
	ned as registered agent to accept service of um familiar with and accept the appointmen		
×.	Pl.		a agree to act in inis capacity
MICHELE L.	L. d. DWWW. Lowms/Required Signature/Registered Age	ent	
	ument and affirm that the facts stated here		e that the false information submitted in a
	Department of State constitutes a third degre		
nu	Required Signature/Incorporator		4/30/2012
MICHELE L.	Required Signature/Incorporator		Date
			,
			्र ज

Name and Title:

Name and Title: