P150000 38806

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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Ms,

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COVER LETTER

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

SURJECT: And	erson Drywall, Ir	ıc.	
50b012C1	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	d 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
		ADDITIONAL CO	
PROM.	603 42 nd St	e (Printed or typed) E Address	
В	radenton FL 342		
94	City.	State & Zip	
	· · · · · · · · · · · · · · · · · · ·	Telephone number	
	E-mail address: (to be use	ed 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)

The name of the corporati	E Anderson Drywall,	Inc.	
ARTICLE II PRIN	<u>VCIPAL OFFICE</u> Principal <u>street</u> address		ess, if different is:
Bradenton FL	34203		
for which a cou	POSE ne corporation is organized is: any and reporation may be incorporated. The Florida Statues.	all lawful transac ated under the pro	ovision
ARTICLE IV SHA The number of shares of			1915 A52 27 D
	TAL OFFICERS AND/OR DIRECTOR Tyvan Anderson, President		
Address	5663. 42 bd St E Bradenton FL 34203	Address:	
Name and Title:			
Name and Title Address	:		

Name and	Title:	Name and Title:
Address		Address:
	REGISTERED AGENT	
The name and Flor	ida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Tyvan Anderson	
Address:	5603 422d St. E	
	Bradenton FL 34203	-
	INCORPORATOR Iress of the Incorporator is:	
rne <u>name and add</u>		
Name:	Tyvan Anderson	
Address:	5603 42 st E	-
	Bradenton FL 3420 3	-
this certificate, I ar	ed us registered agent to accept service of process in familiar with and accept the appointment as reg Mu L Aud (4) (1) Required Signature/Registered Agent	\cdot , i
	Required Signature/Registered Agent	Date
I submit this docu document to the D	ment and affirm that the facts stated herein are epartment of State constitutes a third degree felon	true. I am aware that the false information submitted in a yas provided for in s.817.155, F.S.
	Required Signature/Incorporator	1 1