

P15000043133

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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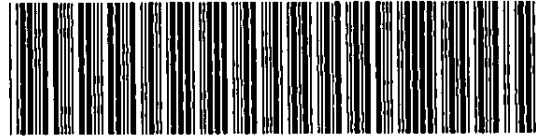
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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8/5/15

COVER LETTER

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

SUBJECT: PHILIP WALZ CONSTRUCTION, 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: PHILIP WALZ
Name (Printed or typed)
1400 AENON CHURCH RD
Address
TALLAHASSEE, FL
City, State & Zip

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY 14 PM 1:24

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AND
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NOTE: Please provide the original and one copy of the articles.

I, PHILIP A. WALZ WILL NOT REINSTATE PHILIP WALZ CONSTRUCTION, INC: DOCUMENT
NUMBER P03000160720 AND I RELEASE THE NAME FOR USE.

Philip A Walz

APPROVED
AND
FILED

15 MAY 14 PM 1:24

SECRET OF STATE
TALLAHASSEE, FLORIDA

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: PHILIP WALZ CONSTRUCTION, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1400 AENON CHURCH RD

Mailing address, if different is:
P.O. BOX 2254

TALLAHASSEE, FL 32304

TALLAHASSEE, FL 32316-2254

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY LEGAL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: PHILIP A. WALZ - PRESIDENT Name and Title: _____

Address P.O. 2254 Address: _____

TALLAHASSEE, FK 32316-2254 _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

SECRET
TALLAHASSEE, FLORIDA

15 MAY 14 PM 1:24

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AND
FILED

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: PHILIP A. WALZ

Address: 1400 AENON CHURCH RD

TALLAHASSEE, FL 32304

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OFFICE OF STATE
TALLAHASSEE, FLORIDA

15 MAY 14 PM 1:24

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ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: PHILIP A. WALZ

Address: P.O. BOX 2254

TALLAHASSEE, FL. 32316-2254

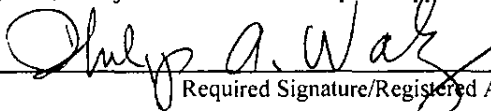
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

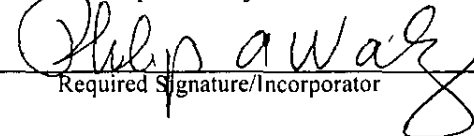
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

5-14-15
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.


Required Signature/Incorporator

5-14-15
Date