

P 15000050112

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800273652488

06/05/15--01002--007 **78.75

FILED
15 JUN -5 PM 2:06
STATE OF GEORGIA
TALLAHASSEE, FLORIDA

gf 6/10/15

COVER LETTER

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

SUBJECT: Greenway Roofing 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: Phillip Hatcher
Name (Printed or typed)

2037 Bergerac Dr.
Address

Jacksonville, FL 32210
City, State & Zip

904-497-4064
Daytime Telephone number

Mhatcher765@yahoo.com
E-mail address: (to be used for future annual report notification)

FILED
15 JUN -5 PM 2:06
TALLAHASSEE, FLORIDA

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)

FILED

15 JUN -5 PM 2:06

SECRETARY OF STATE
STATE OF FLORIDA

ARTICLE I NAME

The name of the corporation shall be: GREENWAY ROOFING INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2037 Bergerac Dr.

Jacksonville, Fl. 32210

7749 Normandy Blvd. #145-145

Jacksonville, Fl. 32221

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To conduct business as a certified Roofing Contractor.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Phillip D. Hatcher / President Name and Title: _____

Address 2037 Bergerac Dr. Address: _____

JACKSONVILLE, FL. 32210 _____

Name and Title: Melissa Hatcher / Vice President Name and Title: _____

Address 2037 Bergerac Dr. Address: _____

JACKSONVILLE, FL. 32210 _____

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: Phillip Hatcher
Address: 2037 Bergerac Dr.
Jacksonville, Fl. 32210

ARTICLE VII INCORPORATOR

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

Name: Phillip Hatcher
Address: 2037 Bergerac Dr.
Jacksonville, Fl. 32210

FILED
15 JUN -5 PM 2:06
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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

Phillip Hatcher

Required Signature/Registered Agent

6-2-15

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.

Phillip Hatcher

Required Signature/Incorporator

6-2-15

Date