

P15000054652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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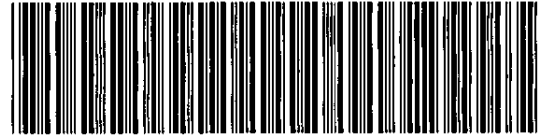
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/22/15--01015--007 **78.75

15 JUN 22 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED

1/4

COVER LETTER

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

SUBJECT: J.C.Pugh Enterprise, 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: J.C.Pugh Enterprise, Inc.

Name (Printed or typed)

5758 Lenox Ave.

Address

Jacksonville, Florida 32205

City, State & Zip

904-388-1177

Daytime Telephone number

PughAmoco@Aol.Com

E-mail address: (to be used 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)

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ARTICLE I NAME
The name of the corporation shall be: J.C.Pugh Enterprise, Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address
5758 Lenox Ave.
Jacksonville, Florida 32205

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is: _____

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES
The number of shares of stock is: 1,000 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Johnny C Pugh, Director Name and Title: _____

Address 625 Oakleaf Plantation Parkway, #411 Address: _____
Orange Park, Fl. 32065

Name and Title: Charles A. Pugh, Director Name and Title: _____

Address 3329 New Beginnings Lane Address: _____
Middleburg, Fl. 32068

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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AND
FILED

Name and Title: _____ Name and Title: 15 JUN 22 PM 4:21

Address _____ Address: SECRETARY OF STATE

TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Johnny C Pugh
Address: 625 Oakleaf Plantation Parkway, Unit 411
Orange Park, FL, 32065

ARTICLE VII INCORPORATOR

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

Name: Johnny C Pugh
Address: 625 Oakleaf Plantation Parkway, Unit 411
Orange Park, FL 32065

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
6-18-15
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
6-18-15
Date