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(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	≘ #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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SEUNETARY OF STATE

N. L. Bruch SEP & L 2015

## **COVER LETTER**

Sept 10, 2015

Department of State Division of Corporations P.O. Box 6327 TALLAHASSEE, FL 32314

GENTLEMEN

Enclosed please find 2 copies of Auticles
of Incorporation, Registered Agent. Incorporator
Also, check in amount of #70.00

Please proceed with listing Henry Creasy Construction, Inc. as a Florida comporation.

Thanks, HENRY CREASY 239 641 0016

> 191 13th ST SW NAPLES FL 34117

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

SUBJECT:	Henry Creasy Con (PROPOSED CORPORA	struction In	<u>-</u> <b>×</b> C⋅
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	<u>UDE SUFFIX</u> )
Enclosed are an orig	inal and one (1) copy of the arti	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  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status  PLY REQUIRED
FROM:	Henry (	(Printed or typed)	
		3th ST SW Address	
	•	State & Zip	7
	Daytime To	64/00/6 elephone number  iy a Com ca	st.net
	E-mail address: (to be used	l for future annual report r	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)

ARTICLE I NAME The name of the corporation	n shall be: HENRY	LEASY CONSTRUCTIO	od, Inc
	AL OFFICE incipal <u>street</u> address	r Mailing	g address, if different is:
191 137	h ST SW		
NAPLES,	h ST SW FC 34117		
ARTICLE III PURPOSE The purpose for which the	corporation is organized is:	Any lawful ction - resi demolition, ctural, plas	activity,
principa	lly constru	ction - resi	deutial,
Commenc;	all remodel	, demolition,	estate
mainta	uce, ardite	ctural, plaz	ining.
Land di	evelopment,	street constr	vetions s
			F S
ARTICLE IV SHARES The number of shares of sto	ck is: <u>5,000</u>		PH 4: 19 YEF STATE EE, FLORID
	OFFICERS AND/OR DIRECTO	<b>─</b> 7	<u>۔</u>
Name and Title:_	HENRY CREASY	Name and Title:	
Address	191 13th ST NAPLES FL	Sw Address:	
_	341	17	
Name and Title:		Name and Title:	
Address		Address:	
_			
Name and Title:		Name and Title:	
Address		Address:	
_			<del>.</del>

Name and Title: HENRY CLEASE, Tres Name and Tit	le:
Address 191 13 Th ST SW Address:	
NAPLES FL 34117	
NAPLES, PC 3411/	
ARTICLE VI REGISTERED AGENT	
The name and Florida street address (P.O. Box NOT acceptable) of the registered a	agent is:
Name: HENRY CREASE,	E S S
	positive of the second of the
Address: 91 13Th ST SW NAPLES FL 34117	SSE TO MAKE THE PARTY OF THE PA
NAPLES FL 3411/	
ARTICLE VII INCORPORATOR	DA DA
The name and address of the Incorporator is:	•
Name: Henry Creasy	
191 1276	
Address: 17/ 13 1 50	
NAPLES, FL 34117	
ARTICLE VIII EFFECTIVE DATE:	ODTIONIAL)
Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than	
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.	
	and a discount of the second devices and the
Having been named as registered agent to accept service of process for the above this certificate, I am familiar with and accept the appointment as registered agent a	nd agree to act in this capacity
	_
Henry Creas.  Required Signature/Registered Agent	9.10.15 Date
•	divided of the formulation of the state of the
I submit this document and affirm that the facts stated herein are true. I am awa document to the Department of State constitutes a third degree felony as provided for	ore inai ine jaise injormation suomitiea in a for in s.817.155, F.S.
Required Signature Ancorporator	9,10,15 Date
reduier diffirmenton boront	