## P16000000118

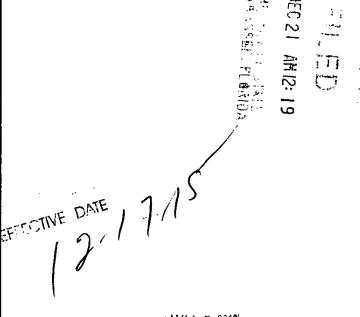
(Requestor's Name)				
(Address)				
(Ad	dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL		
(Business Entity Name)				
(D)	cument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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JAN ~ 5 2016

S. GILBERT

## **COVER LETTER**

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

SUBJECT:	PARKWAY SERVICES INC				
BOBOLCII.	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)				
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	i a check for:		
□ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	S87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED		
FROM:	LOUIS A COLLINS	(Paint Landson A)			
	4961 WEATHERTON	e (Printed or typed)  ST  Address			
<u></u>	NORTH PORT, FL 34	288			
	City <b>941-320-2906</b>	, State & Zip			
	Daytime	l'elephone number			

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

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

tsmooth083@outlook.com

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

9 9	ln com	manee mm chap	-	ozi, r.a. (riviu)	2 1 mm
LE I NAME ne of the corporation	on shall be:	PARKWAY	SERVICES IN	C	15 DEC 21 AM 1
LE II PRINCI		<u>E</u>			ress, if different is:
1 WEATHE	RTON ST	<u> </u>			<del>_</del>
RTH PORT,	FL 3428	8			
pose for which the	corporation	is organized is:	PROVIDE RE	NTAL REAL	ESTATE IN THE
nber of shares of st LE V INITIAL Name and Title:	ock is: OFFICERS	0 ANDYOR DIREC COLLINS - 0	CEO Name an	<del></del>	
nber of shares of st LE V INITIAL	ock is: OFFICERS LOUIS 4961 W	AND/OR DIREC	Name an Address:	<del></del>	
nber of shares of st LE V INITIAL Name and Title: Address	OFFICERS LOUIS 4961 W	COLLINS - C FEATHERTCH PORT, FL	Name an Address:	-	
Name and Title: Address	ock is:	COLLINS - C FEATHERTCH PORT, FL	Name an Address:	d Title:	
nber of shares of state of shares of state of shares of state of shares of state of shares of shares of state of shares of sha	ock is:	COLLINS - C FEATHERTO	Name an Address:  Name an Address:  Address:  Address:  Address:	d Title:	

Name and Tit	le:	Name and Title:	
Address		Address:	
ARTICLE VI REG		alan manakat aman dan sa	
Name:	n street address (P.O. Box NOT acceptable) of LOUIS COLLINS	the registered age	nt is:
Address:	4961 WEATHERTON ST		
Audress:	NORTH PORT, FL 34288		
And the second second			
ARTICLE VII INCO	<u>ORPORATOR</u>		
The <u>name and addres</u>	s of the Incorporator is:		
Name:	LOUIS COLLINS		
Address:	4961 WEATHERTON ST		
NORTH PORT, FL 342			
ARTICLE VIII EFF	<u>FECTIVE DATE:</u> 12-17-201	<u>ج</u>	
	than the date of filing:  Slisted, the date must be specific and cannot	. (O)	TIONAL) ve business davs prior or 90 business
days after the filing.)			· · · · · · · · · · · · · · · · · · ·
	rted in this block does not meet the applicable see date on the Department of State's records.	statutory filing rec	quirements, this date will not be listed as
the document's effecti	ve date on the Department of State's records.		
	is registered agent to accept service of process imiliar with and accept the appointment as reg		
Dun	/ Ollen		12-17-2015
(	Required Signature/Registered Agent		Date
	nt and affirm that the facts stated herein are t		
ancument to the Depar	riment of State constitutes a third degree felong	e as provi <mark>aca j</mark> or i	
> buil	ignature/Incorporator		12-17-2015