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SECRETARY OF STATE
TALLAHASSEE FLORIDA
16 MAR -4 PM 12:37

At. Gulligan MAR 14 2016

COVER LETTER

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

SUBJECT: Architectural & Design Elements, 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: Michael Weaver
Name (Printed or typed)
6628 Hallendale Dr.
Address
Pensacola, Fl. 32526
City, State & Zip
850-341-5868
Daytime Telephone number
mweaver50@gmail.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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TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be: Architectural & Design Elements, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

181 Lynn Dr. Pine A

Santa Rosa Beach, Fl. 32459

Mailing address, if different is:

6628 Hallendale Dr.

Pensacola, Fl. 32526

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Sale & Install Outdoor Arbors, Kitchens, & Flooring.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Weaver / MGR.

Address 6628 Hallendale Dr.

Pensacola, Fl. 32526

Name and Title: Jeannette Glass / MGR.

Address: 2498 Pepper Dr.

Navarre, Fl. 32566

Name and Title: Ruth Noemi Garcia Ortiz De Slade / MGR.

Address 1 Deal Ave. NW

Apt. D

Fort Walton Beach, Fl. 32548

Name and Title:

Address:

Name and Title:

Address

Name and Title:

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: Michael Weaver

Address: 6628 Hallendale Dr.

Pensacola, Fl. 32526

ARTICLE VII INCORPORATOR

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

Name: Michael Weaver

Address: 6628 Hallendale Dr.

Pensacola, Fl. 32526

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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



Required Signature/Registered Agent

3/2/2016

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

3/2/2016

Date