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DEPARTMENT OF STATE

5/3/23/14

COVER LETTER

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Perden Co. 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: Traci W. Fisher
Name (Printed or typed)

616 N. Bronough St.
Address

Tallahassee, Florida 32301
City, State & Zip

850-212-8403
Daytime Telephone number

concrete bids @ yahoo.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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: Perden Co. Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

616 N. Bronough St.
Tallahassee, Florida
32301

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Repairs

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

President, Traci W. Fisher Name and Title: _____

Address: 2023 Forest Glen Address: _____
Tallahassee, FLA
32303

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

APPROVED
AND
FILED

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

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SECRET
FEDERAL BUREAU OF INVESTIGATION

ARTICLE VI REGISTERED AGENT

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

Name: Traci W. Fisher
Address: 616 N. Bronough St.
Tallahassee, Florida 32301

ARTICLE VII INCORPORATOR

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

Name: Traci W. Fisher
Address: 616 N. Bronough St.
Tallahassee, Florida 32301

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 03-23-16 (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

Traci W. Fisher
Required Signature/Registered Agent

03/23/16
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.

Traci W. Fisher
Required Signature/Incorporator

03/23/16
Date