

P16000046446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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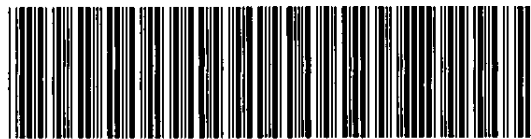
(Business Entity Name)

(Document Number)

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16 MAY 26 AM 11:29  
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## COVER LETTER

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

**SUBJECT:** Turnover Property Maintenance 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:** Eric Fountain  
Name (Printed or typed)  
2636 Fairmount Lane  
Address  
Tallahassee Florida 32308  
City, State & Zip  
8502846727  
Daytime Telephone number  
efountain12@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: Turnover Property Maintenance Inc.

16 MAY 26 2:11:42

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

2636 Fairmount Lane

Tallahassee FL 32308

SECRETARY'S OFFICE  
MAILING ADDRESS, IF DIFFERENT IS:  
TALLAHASSEE, FLORIDA

Same as Principal office

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: To perform maintenance services

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Eric Fountain (owner) P

Name and Title: \_\_\_\_\_

Address 2636 Fairmount Lane  
Tallahassee, FL 32308

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

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: Eric Fountain  
Address: 2636 Fairmount Lane  
Tallahassee, Fl. 32308

**ARTICLE VII INCORPORATOR**

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

Name: Eric Fountain  
Address: 2636 Fairmount Lane  
Tallahassee, Fl. 32308

**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*

Eric Fountain 5/25/2016  
Required Signature/Registered Agent 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.*

Eric Fountain 5/24/2016  
Required Signature/Incorporator Date