

P16000080656

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(Business Entity Name)

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STATE
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COVER LETTER

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

SUBJECT: Lane Williams Construction 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: Lane Williams
Name (Printed or typed)

412 Anchors Way
Address

Crawfordville FL 32327
City, State & Zip

850 728 7177
Daytime Telephone number

Lane 22896@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)

ARTICLE I NAME

The name of the corporation shall be: Lane Williams Construction IWC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

42 Anchors Way
Crawfordville, FL 32327

same as

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Construction, Lawn care

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: President Lane Williams Name and Title: _____

Address 42 Anchors Way Address: _____

Crawfordville FL
32327

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

16 OCT -5 AM 9:29
STATE
TALLAHASSEE FLORIDA

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: Lane Williams
Address: 42 Anchors Way
Crawfordville FL 32327

ARTICLE VII INCORPORATOR

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

Name: Lane Williams
Address: 42 Anchors Way
Crawfordville FL 32327

SECTION 607.01
TALLAHASSEE, FLORIDA

16 OCT -5 AM 9:30

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

[Signature]
Required Signature/Registered Agent

10/5/16
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.

[Signature]
Required Signature/Incorporator

10/5/16
Date