

P19000005719

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

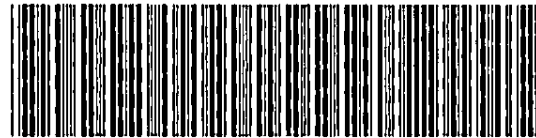
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

M19000004394

JAN 10 2013



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01/07/19--01025--003 **70.00

RECEIVED

2019 JAN 14 AM 8:48



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 14, 2019

DAVID R. MAINS, PARALEGAL, KARLSON LAW GROUP, P.A.
301 DAL HALL BLVD.
LAKE PLACID, FL 33852

SUBJECT: JOSH B. WILSON, INC.
Ref. Number: W19000004394

We have received your document for JOSH B. WILSON, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The name designated in your document is unavailable because it is the same as or not distinguishable from an existing entity. If the principals are the same in both entities, please send a letter or affidavit advising us of this association, along with your articles so that we may complete the filing process.

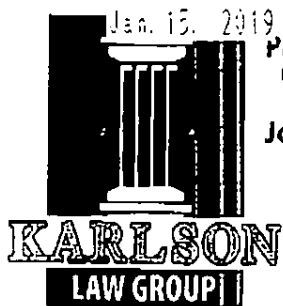
L18000249845-JOSH B. WILSON, LLC Name release letter must be sign dated and notarized.,

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 619A00000995



Jan. 15, 2019 9:26AM

Pamela T. Karlson, B.C.S.
Board Certified Real Estate Lawyer



Joy Bogaert, Attorney at Law

No. 4966 P. 2

December 28, 2018

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

RE: Josh B. Wilson, Inc.
Articles of Incorporation
Our File No. 528-18

Dear Sir or Madam,

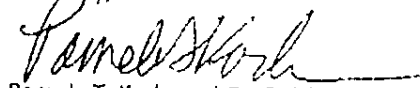
Enclosed please find the following pertaining to the above-referenced matter:

1. Cover Letter providing point of contact for this filing;
2. Completed Articles of Incorporation for Josh B. Wilson, Inc. (original and one copy);
3. Our Check in the amount of \$70.00 made payable to the Florida Department of State to cover the filing fee.

Please be advised that my client, Josh B. Wilson, is the same individual that filed Josh B. Wilson, LLC, Document Number L18000249845, on October 24, 2018 (see enclosed Division of Corporations printout). Josh B. Wilson gives his permission and authorizes the filing of Josh B. Wilson, Inc., as shown by his signature below.

If you should have any questions, or desire additional information, you may contact my paralegal, David Mains, at 863-465-5033 or david@karlsonlaw.com.

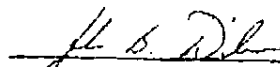
Sincerely,


Pamela T. Karlson, J.D., B.C.S.

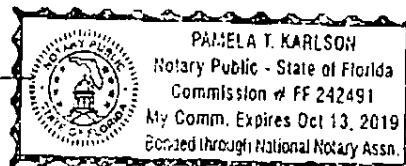
PTK/drm

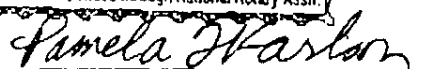
Enclosures as stated.

AGREE TO THE ABOVE AS STATED:


JOSEPH B. WILSON

This letter was
acknowledged before me
on Dec 28, 2018 by Josh
B. Wilson, who is personally
known to me.




Notary Public Signature

COVER LETTER

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

SUBJECT: JOSH B. WILSON, 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: DAVID R. MAINS, PARALEGAL, KARLSON LAW GROUP, P.A.
Name (Printed or typed)

301 DAL HALL BLVD.
Address

LAKE PLACID, FL 33852
City, State & Zip

863-465-5033
Daytime Telephone number

INFO@KARLSONLAW.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: JOSH B. WILSON, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
402 NW 4TH STREET
OKEECHOBEE, FL 34972

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 8000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSH B. WILSON, PRESIDENT

Name and Title:

Address 402 NW 4TH STREET

Address:

OKEECHOBEE, FL 34972

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

2016 JAN 14 AM 8:49

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: KARLSON LAW GROUP, P.A.

Address: 301 Dal Hall Blvd.

Lake Placid FL 33852

ARTICLE VII INCORPORATOR

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

Name: JOSH B. WILSON

Address: 402 NW 4TH STREET

OKEECHOBEE, FL 34972

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JANUARY 1, 2019. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five days prior or 90 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

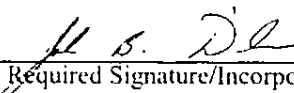


Required Signature/Registered Agent

1/3/19

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

1/3/19

Date