

3/6/2019

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : WILSON TAX & ACCOUNTING INC.
Account Number : I20150000107
Phone : (941)625-1925
Fax Number : (941)625-1526

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: CREST@Tax Savers FL.net

FLORIDA PROFIT/NON PROFIT CORPORATION
Lakewood Carpentry Services Inc

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

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: Lakewood Carpentry Services Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

13443 SW Pembroke Cir N

13443 SW Pembroke Cir N

Lake Suzy, FL 34269

Lake Suzy, FL 34269

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ruel Grover

Name and Title: _____

Address President

Address: _____

13443 SW Pembroke Cir N

Lake Suzy, FL 34269

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

FILED
19 MAR -6 AM 11:04
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: Ruel Grover
Address: 13443 SW Pembroke Cir N
Lake Suzy, FL 34269

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ruel Grover
Address: 13443 SW Pembroke Cir N
Lake Suzy, FL 34269

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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 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

[Signature] Required Signature/Registered Agent 3/6/2019 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 3/6/2019 Date