

P20000002635

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

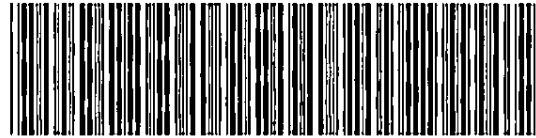
Special Instructions to Filing Officer:

Office Use Only

W1900009719

JAN 15 2020

T. SCOTT



200336709672

11/22/19--01022--020 \*\*78.75

FILED  
2020 JAN 13 AM 8:38  
FBI - MEMPHIS



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 18, 2019

KEY WEST HOME AND MOLD INSPECTIONS INCORPORATED  
17130 AMBER JACK LANE  
SUGARLOAF, FL 33042

SUBJECT: KEY WEST HOME AND MOLD INSPECTIONS INCORPORATED  
Ref. Number: W19000109779

We have received your document for KEY WEST HOME AND MOLD INSPECTIONS INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.  
<http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/>

The effective date is not acceptable since it is not within five working days of the date of receipt.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

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: 219A00025743

RECEIVED  
2020 JAN 13 PM 1:50  
DIVISION OF CORPORATIONS  
COMMERCIAL  
REGISTRY

## COVER LETTER

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

**SUBJECT:** KEY WEST HOME AND MOLD INSPECTIONS INCORPORATED

(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:** KEY WEST HOME AND MOLD INBSPECTIONS INCORPORATED

Name (Printed or typed)

17130 AMBER JACK LANE

Address

SUGARLOAF, FL 33042

City, State & Zip

305-928-9197

Daytime Telephone number

DLG152@AOL.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: KEY WEST HOME AND MOLD INSPECTIONS CORPORATED

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

17130 AMBER JACK LANE

SUGARLOAF, FL 33042

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: HOME INSPECTIONS

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: LUIGI VACCARRO, III, PRES.

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

Address 17130 AMBER JACK LANE

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

SUGARLOAF, FL 33042

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

FILED  
2020 JAN 13 AM 8:39  
CLERK OF DISTRICT COURT  
JACKSONVILLE, 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: DEBRA L. RAINER \_\_\_\_\_

Address: 185 SOUTH POINT DRIVE \_\_\_\_\_

SUGARLOAF, FL 33042 \_\_\_\_\_

**ARTICLE VII INCORPORATOR**

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

Name: DEBRA L. RAINER \_\_\_\_\_

Address: 185 SOUTH POINT DRIVE \_\_\_\_\_

SUGARLOAF, FL 33042 \_\_\_\_\_

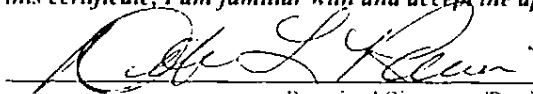
**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: ~~11/16/2019~~ 01/01/20 (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*

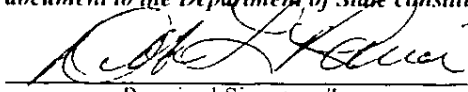


Required Signature/Registered Agent

01-01-20

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

01-01-20

Date