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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 18, 2019

OUTDOOR SPECIALTIES OF NORTH EAST FLORIDA, INC.
1873 SWISS OAKS ST
SAINT JOHNS, FL 32259

SUBJECT: OUTDOOR SPECIALTIES OF NORTH EAST FLORIDA, INC.
Ref. Number: W19000101044

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the **complete document**, including the electronic filing cover sheet.

The specific purpose of the entity must be set forth in the document.

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

Shondreka M Bellenger
Regulatory Specialist II
New Filing Section

Letter Number: 719A00023623

COVER LETTER

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

SUBJECT: OUTDOOR SPECIALTIES OF NORTH EAST FLORIDA, 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: OUTDOOR SPECIALTIES OF NORTH EAST FLORIDA, INC.
Name (Printed or typed)

1873 SWISS OAKS ST.
Address

SAINT JOHNS, FL 32259
City, State & Zip

770-289-2645
Daytime Telephone number

FLANAGAN LANDSCAPE INC @ GMAIL.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: OUTDOOR SPECIALTIES OF NORTH EAST FLORIDA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1873 SWISS OAKS ST.
SAINT JOHNS, FL 32259

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

COMMERCIAL SPECIALTIES LANDSCAPE

ARTICLE IV SHARES

The number of shares of stock is: 1,005 SHS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JARED FLANAGAN, DIRECTOR Name and Title: _____

Address 1873 SWISS OAKS STREET Address: _____
SAINT JOHNS, FL 32259

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: Jared Flanagan

Address: 1873 Swiss Oaks Street

Saint Johns, FL 32259

ARTICLE VII INCORPORATOR

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

Name: Jared Flanagan

Address: 1873 Swiss Oaks Street

Saint Johns, FL 32259

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

① Jared Flanagan
Required Signature/Registered Agent

10-22-19
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.

① Jared Flanagan
Required Signature/Incorporator

10-22-19
Date