

P24000028021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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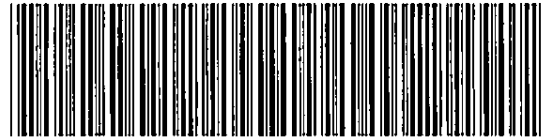
(Business Entity Name)

(Document Number)

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

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2024 JAN 10 PM 3:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W24000021803

2/8/24

## COVER LETTER

Department of State  
New Filing Section  
Office of Corporations  
P. O. Box 6327  
Tallahassee, FL 32312

SUBJECT: Maloney Home Inspections Inc.

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$75.00 Filing Fee  
☒ \$75.00 Filing Fee  
& Certificate of Status

☐ \$75.00 Filing Fee  
& Certified Copy

☐ \$27.50 Filing Fee,  
Certified Copy  
& Certificate of  
Status

**ADDITIONAL COPY REQUIRED**

FROM: Thomas Maloney  
Name (Printed or Typed)

279 Enfield Ct.  
Address

West Palm Beach, FL 33415  
City, State & Zip

(561) 365-4821  
Daytime Telephone number

This address will be used for future annual report notification.

thomas1961maloney@gmail.com

NOTE: Please print all information on this cover letter.

**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: Maloney Home Inspections Inc.

ARTICLE II PRINCIPAL OFFICE  
Principal street address \_\_\_\_\_ Mailing address, if different is: \_\_\_\_\_  
279 Enfield Ct. West Palm Beach, FL

ARTICLE III PURPOSE  
The purpose for which the corporation is organized is 33415 Home Inspections

ARTICLE IV SHARES  
The number of shares of stock is 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

|                                            |                |
|--------------------------------------------|----------------|
| Name and Title                             | Name and Title |
| Address <u>Thomas Maloney</u>              | Address: _____ |
| <u>279 Enfield Ct. West Palm Beach, FL</u> |                |
| <u>33415</u>                               |                |

|                |                |
|----------------|----------------|
| 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: Thomas Maloney

Address:

279 Enfield Ct. West Palm Beach, FL  
33415

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Thomas Maloney

Address:

279 Enfield Ct. West Palm Beach, FL  
33415

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 1/2/24 (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

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 § 917.155, F.S.

Required Signature/Incorporator

Date

1/2/24