

P95000062312

TRANSMITTAL LETTER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 AUG 11 AM 11:01

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

000001558880
-08/11/95--01075--006
*****78.75 *****78.75

SUBJECT: PASCO GLASS CO., INC.

(Proposed corporate name - must include suffix)

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

☐ \$70.00
Filing Fee

☒ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☐ \$131.25
Filing Fee,
Certified Copy
& Certificate

Additional Copy Required

FROM: LESLEY "THERESE" KERSEY

Name (printed or typed)

14236 14TH ST.

Address

DADE CITY, FLA. 33525

City, State & Zip

(904) 523-2395

Daytime Telephone number

*Lesley Kersey gave
auth by phone
to add (100 shares)
8/16/95*

NOTE: Please provide the original and one copy of the articles.

cf 8/14/95

ARTICLES OF INCORPORATION

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The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

PASCO GLASS CO., INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

14236 14TH ST. DADE CITY, FLA. 33525

MAILING ADDRESS:

P.O. BOX 940 ZEPHYRHILLS, FLA. 33539-0940

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

~~NONE~~ 100

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

LESLEY "THERESE" KERSEY

14236 14TH ST.

DADE CITY, FLA. 33525

MAILING ADDRESS:

P.O. BOX 940
ZEPHYRHILLS, FLA.
33539-0940

ARTICLE V INCORPORATOR(S)

See instructions for officers/directors

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

LESLEY "THERESE" KERSEY
14236 14TH ST.
DADE CITY, FLA. 33525

FLOYD BENJAMIN KERSEY III
14236 14TH ST.
DADE CITY, FLA. 33525

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

4TH day of AUGUST, 19 95.

Lesley Therese Kersey
Signature

Floyd Benjamin Kersey III
Signature

Signature

NOTE: Affixing an officer title after a signature of an incorporator does not constitute the designation of officers.

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

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PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: PASCO GLASS CO., INC.

2. The name and address of the registered agent and office is:

LESLEY "THERESE" KERSEY
(NAME)

14236 14TH ST.
(P.O. Box or Mail Drop Box **NOT** ACCEPTABLE)

DADE CITY, FLA. 33525
(CITY/STATE/ZIP)

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Lesley Therese Kersey
(SIGNATURE)

8-4-95
(DATE)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS **POWERED AND FILED**

APPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

FLORIDA CORPORATION

DOCUMENT # **P95000062312**

PASCO GLASS CO., INC.

96 SEP 23 PM 1:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

14236 14TH STREET

DADE CITY FL 33523

POST OFFICE BOX 940

ZEPHYRHILLS FL 33599-0940



REINSTATEMENT 96

If above information is incorrect in any way, please through incorrect information and order correction below.
A. New Principal Office Address, If Applicable B. New Mailing Office Address, If Applicable

Suite, Apt. #, Etc.

Suite, Apt. #, Etc.
38465 CR 54 East
City & State
Zephyrhills, FL
Country
33540 U.S.

4. Date Incorporated or Qualified
To Do Business in Florida

08/11/1995

5. FLE Number

59 3333 241

Applied For
Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee Required
for a Certificate of Status

7. A. If not a Principal Office, use of Each Office and/or Director for (If not a nonprofit corporation, must list at least 3 directors)

Name of Officers
and/or Directors

Street Address of Each
Office and/or Director
(Do NOT Use Post Office Box Numbers)

P Lesley Therese Kersey 14236 14th Street
VP Floyd Benjamin Kersey 14236 14th Street

City / State / Zip

Dade City, FL 33523

Dade City, FL 33523

700001967087
-10/08/96--01031--025
****375.00--****375.00

8/10/96

8. Name and Address of Current Registered Agent

KERSEY, LESLEY T
14236 14TH STREET
DADE CITY FL 33523

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State
FL

Zip Code

33523

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of
Registered Agent

Lesley Therese Kersey
REGISTERED AGENT MUST SIGN

Date

9.20.96

11 Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. I, being an officer and director of this corporation or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S., further certify that when filing this reinstatement application, the corporation's dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees and to the corporation have been paid, and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(b), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Lesley Therese Kersey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9.20.96
Date

(813) 783-2731
Daytime Phone