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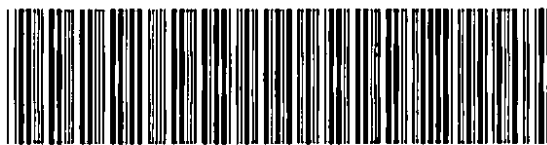
Certificates of Status _____

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2017 OCT -3 PM 1:11
17 OCT -3 PM 1:00

COVER LETTER

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

SUBJECT: CHESTER DEAN, CORP.
(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: Jacqueline Y. Perkins
Name (Printed or typed)

3437 Blue Jay Drive
Address

Tallahassee, FL 32305
City, State & Zip

(850) 294-3768 / (850) 656-3147
Daytime Telephone number

jp38@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: CHESTER DEAN, CORP.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3437 Blue Jay Drive
TALLAHASSEE, FL 32305

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To manage, coordinate and
facilitate the preservation, cultivation and
maintenance of family owned properties,
including aquatic and agricultural utilization
of the land.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ray L. Mathis, II Name and Title: Ike Q. Perkins

Address Co-Director, Operations Address: Co-Director, Operations
6365 SW 143rd Lane Road 3765 High Street-Apt #5
OCOLA, FL 34473 OAKLAND, CA 94619

Name and Title: Jamil Perkins Name and Title: Regina D. Perkins

Address Director, Planning & Analysis Address: Director, Logistics
1904 54th Terrace South-Apt #3 1618 Keith Street
St. Petersburg, FL 33712 Tallahassee, FL 32310

Name and Title: Jacqueline M. Perkins Name and Title: Thermon D. Perkins

Address Dir, Fiscal Affairs & Advisor Address: Dir, Govt. Affairs & Advisor
3437 Blue Jay Drive 2991 Fenwick Ct. East
Tallahassee, FL 32305 Tallahassee, FL 32309

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: Jacqueline Y. Perkins

Address: 3437 Blue Jay Drive
TALLAHASSEE, FL 32305

ARTICLE VII INCORPORATOR

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

Name: Jacqueline Y. Perkins

Address: 3437 Blue Jay Drive
TALLAHASSEE, FL 32305

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: September 27, 2017 (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

Jacqueline Y. Perkins
Required Signature/Registered Agent

Oct 3, 2017
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.

Jacqueline Y. Perkins
Required Signature/Incorporator

Oct 3, 2017
Date