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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1 Burch AUG 16 2012

COVER LETTER

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

SUBJECT: SUSAN AVILA-CALLAHAN, 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input checked="" type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: LAWRENCE B. CALLAHAN
Name (Printed or typed)

4300 RIVERSIDE DR 123
Address

PUNTA GORDA, FL 33982
City, State & Zip

(941) 661-4525
Daytime Telephone number

susanacallahan@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: **SUSAN AVILA-CALLAHAN, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
4300 RIVERSIDE DR 123
PUNTA GORDA, FL 33982

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
ANY AND ALL LAWFUL BUSINESS

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **LAWRENCE B. CALLAHAN - P, T** Name and Title: _____
Address: **4300 RIVERSIDE DR 123** Address: _____
PUNTA GORDA, FL 33982

Name and Title: **SUSAN AVILA-CALLAHAN - VP, S** Name and Title: _____
Address: **4300 RIVERSIDE DR 123** Address: _____
PUNTA GORDA, FL 33982

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: **LAWRENCE B. CALLAHAN**
Address: **4300 RIVERSIDE DR 123**
PUNTA GORDA, FL 33982

ARTICLE VII INCORPORATOR

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

Name: **LAWRENCE B. CALLAHAN**
Address: **4300 RIVERSIDE DR 123**
PUNTA GORDA, FL 33982

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

Lawrence B. Callahan Required Signature/Registered Agent **8/13/12** 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.

Lawrence B. Callahan Required Signature/Incorporator **8/13/12** Date