# POODOOTA 138

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

SUBJECT: Fidelco Trust (Proposed corpora	ite name - must include suffi	<b>x</b> )	
		800003167 -03/13/001 *****78.50	'6437 01139001 *****78.50
Enclosed is an original and one (1) copy of the articles of incorporation and a check for:			
☐ \$70.00 ☐ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	☐ \$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM: Bevery Hald	eman rinted or typed)		, g s
1876 n un	iversity Dr.		
Plantation, City,	FC 333322 State & Zip	· ·	LD STATE
	8897 elephone number	<u>*</u>	<u>⊅</u>

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

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# ARTICLES OF INCORPARATION

In Compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### ARTICLE I NAME

The name of the corporation shall be Fidelco Trust, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is 1876 N. University Dr. Plantation, FL 33322.

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is to provide retail, revolving, credit lines to local merchant's customers.

### ARTICLE IV SHARES

The number of shares of stock is 500.

# ARTICLE V INITIAL OFFICERS/DIRECTORS

The President of the Corporation shall be Beverly Haldeman, residing at 39503 E. 56<sup>th</sup> Terrace, Fort Lauderdale, FL 33305. The Vice-President shall be Melissa Haldeman, residing at 39503 E 56<sup>th</sup> Terrace, Fort Lauderdale, FL 33305.

# ARTICLE VI REGISTERED AGENT

The registered agent for the corporation is Beverly Haldeman – 1876 N. University Dr., Plantation, FL 33322.

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Molison Maldemon 3950385675 Terr. Fortfackerdoll, De Melissa Haldeman 33305

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.

Signature/Registered Agent

Date

Date

Signature/Incorporator