

TRANSMITTAL LETTER
P0000063104

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

200003298872-5
-06/21/00-01051-015
*****87.50 *****87.50

SUBJECT:

C & N Associates, 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 of Status

☐ \$78.75
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM:

Nathaniel Mitchell

Name (Printed or typed)

8420 S. US 1

Address

Port St Lucie, FL 34952

City, State & Zip

561-878-3333

Daytime Telephone number

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

00 JUN 28 AM 8:52

FILED

T BROWN JUN 29 2000

6/27/00

To Whom it May Concern:

Please Airborne my document to me. Here is my Account # 175582963. Thank you for your cooperation. If you have any questions please call me at 561 878-3333.

Sincerely,

Nate Mitchell



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

June 26, 2000

NATHANIEL MITCHELL
8420 S. US 1
PORT ST. LUCIE, FL 34952

SUBJECT: C & N ASSOCIATES, INC.
Ref. Number: W00000016245

175582963
Amborn

We have received your document for C & N ASSOCIATES, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6933.

Teresa Brown
Corporate Specialist

Letter Number: 300A00035989

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:

C&N Associates, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8420 S. US 1
PORT ST LUCIE, FL 34952

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Rambow / Vaccums / Sales / Service

ARTICLE IV SHARES

The number of shares of stock is:

One

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es): Nathaniel Mitchell CEO
8420 S. US 1
PSC FL 34952

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Nathaniel Mitchell
8420 S. US 1
PSC FL 34952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Nathaniel Mitchell
8420 S. US 1
PSC FL 34952

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

Nathaniel Mitchell
Signature/Registered Agent

6/27/00
Date

Nathaniel Mitchell
Signature/Incorporator

6/27/00
Date

FILED
00 JUN 28 AM 8:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA