

TRANSMITTAL LETTER

PD1000028463

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

200003856082--5
-03/16/01--01070--003
*****70.00 *****70.00

SUBJECT: FRONZAK INCORPORATED
(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: STACEY L. FRONZAK
Name (Printed or typed)

5325 TWIN CREEKS DR.
Address

VALRICO, FLORIDA 33594
City, State & Zip

(813) 220-2530
Daytime Telephone number

01 MAR 16 AM 11:07
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

3-20-01

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:

FRONCZAK INCORPORATED

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5325 TWIN CREEKS DR.
VALRICO, FL 33594

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO CONDUCT ANY BUSINESS THAT IS LEGAL
IN FLORIDA AND THE UNITED STATES

ARTICLE IV SHARES

The number of shares of stock is:

SEVENTY-FIVE HUNDRED (7,500) AT \$1.00 (ONE DOLLAR) PAR VALUE.

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

STACEY L. FRONCZAK
5325 TWIN CREEKS DR.
VALRICO, FL 33594

ARTICLE VI REGISTERED AGENT

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


STACEY L. FRONCZAK
5325 TWIN CREEKS DR.
VALRICO, FL 33594

ARTICLE VII INCORPORATOR

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

STACEY L. FRONCZAK
5325 TWIN CREEKS DR.
VALRICO, FL 33594


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



Signature/Registered Agent

01-16-00

Date



Signature/Incorporator

01-16-00

Date

FILED
01 MAR 16 AM 11:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA