# 40200122829

(Requestor's Name)	_			
(Address)	_			
(Address)	_			
(City/State/Zip/Phone #)	_			
PICK-UP WAIT MAIL				
(Business Entity Name)	_			
(Document Number)				
Certified Copies Certificates of Status	_			
Special Instructions to Filing Officer:				



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Office Use Only

# TRANSMITTAL LETTER

•.					
Department of State					
Division of Corporat	ions				
P. O. Box 6327				· -	
Tallahassee, FL 323	14				
SUBJECT:					
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u> I	JDE SUFFIX)	4 · 4	
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	l a check for:		
•					
\$70.00	××× \$78.75	\$78.75	\$87.50		
Filing Fee	Filing Fee	1 -	Filing Fcc,		
	& Certificate of Status	& Certified Copy	Certified Copy		
			& Certificate of		
			Status		
		ADDITIONAL CO	PPY REQUIRED		
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	MASTER TAX & ACC 3846 CURRY FO				
	ORLANDO, FL	32806			

Enough to the

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

-7113
Daytime Telephone number

407-896<u>-</u>7113

# 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:

CE Leon Construction Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4431 Vista Woods Ct. Orlando Fl, 32822

# ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction

## ARTICLE IV SHARES

The number of shares of stock is:

10,000 shares at a par value of \$1.00

# ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Jaime L Segura (President)\_ 4431 Vista Woods Ct Orlando Fl, 32822 Cesar Leonides (v/President) 4431 Vista Woods Ct Orlando Fl, 32822

### ARTICLE VI REGISTERED AGENT

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

Jaime L Segura 4431 Vista Woods Ct Orlando Fl, 32822

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Signature/Incorporator

Jaime L Segura (President)	Cesar Leonides (V/President)
4431 Vista Woods Ct	4431 Vista Woods Ct
	Orlando Fl, 32822
*************	******************************
	rvice of process for the above stated corporation at the place designated in this ment as registered agent and agree to act in this capacity
Signature/Registered Agent	
Signature/Registered Agent	Date
_	

NZ NOW 12 PM 4: 21

Date