

P030000019313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

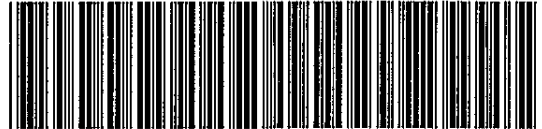
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Cafe de Fondue 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

☐ \$78.75
Filing Fee
& Certified Copy

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

ADDITIONAL COPY REQUIRED

FROM: Dennis E. Mulder/ Incorporator

Name (Printed or typed)

1143 Wycliffe St.

Address

Deltona, FL 32725

City, State & Zip

386-216-3620

Daytime Telephone number

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:

Cafe de Fondue *INC.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

841 4th ave. Deltona, FL 32725

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To provide a unique dinnig experience to Volusia County, focusing on the Deltona area

ARTICLE IV SHARES

The number of shares of stock is:

100 (one hundred)

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

Andree Mulder, 841 4th ave. Deltona, FL 32725, President

ARTICLE VI REGISTERED AGENT

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

Johnnie Mulder, 841 4th ave. Deltona, FI 32725, registered agent

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Dennis E. Mulder, 1143 Wycliffe St. Deltona, FL 32725

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


Date


Signature/Incorporator


Date

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA