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DIVISION OF CORPORATIONS
03 APR 24 PM 3:25

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T. SMITH
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DIVISION OF CORPORATIONS
APR 24 2003

TRANSMITTAL LETTER

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

SUBJECT: CAPITAL UTILITY Consultants, 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:

~~XXXXXXXXXXXXXXXXXXXX~~ RAFAEL A. RODRIGUEZ
Name (Printed or typed) II

13 Marie Circle
Address

Crawfordville, FL
City, State & Zip

850-294-6189
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: CAPITAL UTILITY Consultants, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

13 MARIE CIRCLE
Crawfordville, FL 32327

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all lawful business.

ARTICLE IV SHARES

The number of shares of stock is:

2

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

Rafael A. Rodriguez II
13 Marie Circle
Crawfordville, FL 32327

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Rafael A. Rodriguez II
13 Marie Circle
Crawfordville, FL 32327

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

4/24/03

Signature/Incorporator

Date

4/24/03

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