

P03000064352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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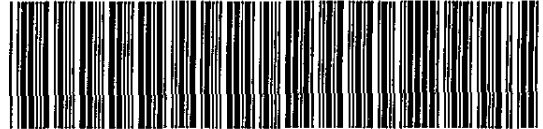
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06-11-03  
D

## TRANSMITTAL LETTER

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

SUBJECT: CAM ONE, Incorporated  
(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: Richard T. Durand  
Name (Printed or typed)

1596 S.E. CONNELL Circle  
Address

Port St. Lucie, Florida 34952  
City, State & Zip

772-398-4241 772-335-7984 (work)  
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:

CAM ONE, INCORPORATED

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

1596 S.E. COLLETTE CIRCLE  
FORT ST. LUCIE, FL 34952

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

PROPERTY MANAGEMENT

**ARTICLE IV SHARES**

The number of shares of stock is:

100

**ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)**

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

Richard T. Durand, President

**ARTICLE VI REGISTERED AGENT**

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

Richard T. Durand  
1596 S.E. COLLETTE CIRCLE  
FORT ST. LUCIE, FLORIDA 34952

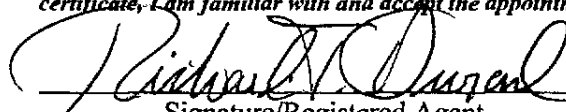
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

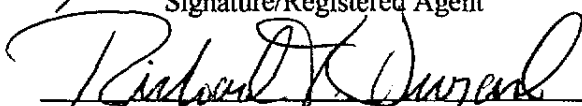
Richard T. Durand  
1596 S.E. COLLETTE CIRCLE  
FORT ST. LUCIE, FLORIDA 34952

\*\*\*\*\*

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

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

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TALLAHASSEE, FLORIDA

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