

P04000073471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

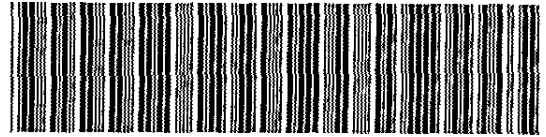
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

198

## TRANSMITTAL LETTER

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

SUBJECT: CHERMAK COMPANY  
(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: MARK CHERMAK  
Name (Printed or typed)

2900 MONTICELLO PL # 204  
Address

ORLANDO FL 32835  
City, State & Zip

321-662-2354  
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:

**CHERMAK COMPANY**

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

**2900 MONTICELLO PL # 204  
ORLANDO FL 32835**

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**GENERAL CONTRACTING**

## ARTICLE IV SHARES

The number of shares of stock is: **100**

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

**MARK J CHERMAK OWNER  
2900 MONTICELLO PL # 204  
ORLANDO FL 32835**

## ARTICLE VI REGISTERED AGENT

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

**MARK J CHERMAK  
2900 MONTICELLO PL # 204  
ORLANDO FL 32835**

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

**MARK J CHERMAK  
2900 MONTICELLO PL # 204  
ORLANDO FL 32835**

\*\*\*\*\*

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

**4-29-04**  
Date

  
Signature/Incorporator

**4-29-04**  
Date

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TALLAHASSEE, FLORIDA