

PO4000159255

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

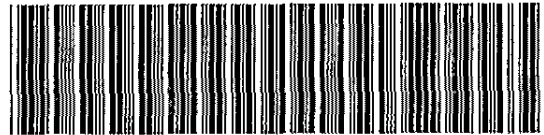
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

16

11-23

TRANSMITTAL LETTER

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

SUBJECT: Victor Chacon 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: Bon Benfield
Name (Printed or typed)

58 Sioux Circle
Address

Havana, FL 32333
City, State & Zip

(850) 539-5171
Daytime Telephone number

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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:

Victor Chacon Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PO Box 652

Gretna, FL 32332

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Construction dry wall

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s) and address(es):

Victor Chacon PO Box 652 Gretna, FL 32332 - President

Carlos Chacon PO Box 652 Gretna, FL 32332 - Vice President

Oscar Suentes PO Box 652 Gretna, FL 32332 - Secretary

ARTICLE VI REGISTERED AGENT

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

Ron Benfield

58 Sioux Circle

Havana, FL 32333

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ron Benfield

58 Sioux Circle

Havana, FL 32333

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

Ron Benfield

Signature/Registered Agent

11/22/04
Date

Ron Benfield

Signature/Incorporator

11/22/04
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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