# P050000/554/

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
ecial Instructions to Filing Officer:			

Office Use Only



100045347711



5 JAN 31 PH 4: 30

1,3105

# TRANSMITTAL LETTER

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

SUBJECT:	S.A.U.L CARPENTRY CONTRACTOR, INC.			
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)			
Enclosed are	an original and one (1) copy of the a	articles of incorporation and a	check for:	
\$70.00	<b>□</b> \$78.75	\$78.75	\$87.50	
Filing Fee	Filing Fee	Filing Fee	Filing Fee,	
	& Certificate of Status	& Certified Copy	Certified Copy	
		1	& Certificate of Status	
		ADDITIONAL	ADDITIONAL COPY REQUIRED	
		L		
FROM:	Saul Santiago			
	N	ame (Printed or typed)		
	1324 CR 308			
		ddress		
	Crescent City FL 32112			
	¢	ity, State & Zip		
	(386) 698-0842			
	,	avtime Telephone Number		

NOTE: Please provide the original and one copy of the articles.

THED

#### ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

05 JAN 31 PM 4: 30

#### ARTICLE I NAME

The name of the corporation shall be:

HOLDINGS FE, FLANDA

#### S.A.U.L. CARPENTRY CONTRACTOR, INC.

# ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 1324 CR 308
Crescent City FL 32112

#### ARTICLE III \_ PURPOSE

The purpose for which the corporation is organized is:

Carpentry Contracting

# ARTICLE IV SHARES

The number of shares of stock is:

5,000

# ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), addresses) and specific titles(s):

Saul Santiago, President Lourdes Santiago, Secretary

1324 CR 308 324 CR 308

Crescent City FL 32112 Crescent City FL 32112

# ARTICLE VI REGISTERED AGENT

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

Saul Santiago 1324 CR 308

Crescent City FL 32112

# ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Donald J. Segui

2120 US 1 South, Suite 115

St Augustine FL 32086

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/

Signature/Incorporator

Date