

P05000147957

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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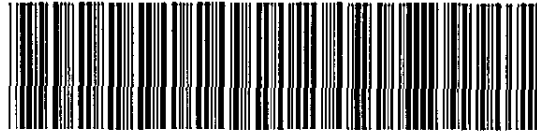
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. 11-4

TRANSMITTAL LETTER

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

SUBJECT: SHAN OF ORLANDO, INC
(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: CASSANDRA BROWN
Name (Printed or typed)

1855 SUGAR COVE CT
Address

ORLANDO FL 34761
City, State & Zip

407 658-9810
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:

SHAN OF ORLANDO, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4422 CURRY FORD RD
ORLANDO, FL 32812

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Lawful BUSINESS IN STATE OF FL

ARTICLE IV SHARES

The number of shares of stock is:

100 \$100/share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Cassandra Brown Pres, 1855 Sugar Cove Ct
Orlando, FL 32812

Ronald Brown Vice Pres, 1855 Sugar Cove Ct
Orlando, FL 32812

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Cassandra Brown
1855 Sugar Cove Ct
Orlando FL 32812

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Cassandra Brown
1855 Sugar Cove Ct
Orlando FL 32812

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

Cassandra Curnell Brown

Signature/Registered Agent

Cassandra Curnell Brown

Cassandra Curnell Brown

Signature/Incorporator

Cassandra Curnell Brown

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-1-05

Date

11-1-05

Date