

POS000168241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

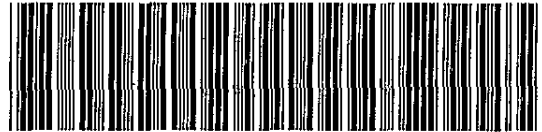
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300062385283

12/27/05--01016--019 \*\*78.75

FILED

05 DEC 29 AM 10:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Chivers DEC 30 2005

December 21, 2005

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

Dear Sir:

SUBJECT: CLUB CARAMEL INC.

This letter is to inform you that we'd like to dissolve this non profit organization and recreate it as a profit organization. Attached is all of the appropriate documentation for these requests.

In addition on Monday December 19, 2005 I tried to make this change online and was charged \$78.75 I've also attached the receipt for this transaction, can you please issue a credit to our account.

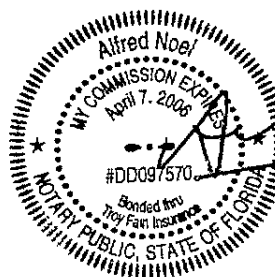
Sincerely,

*L. Champagne*

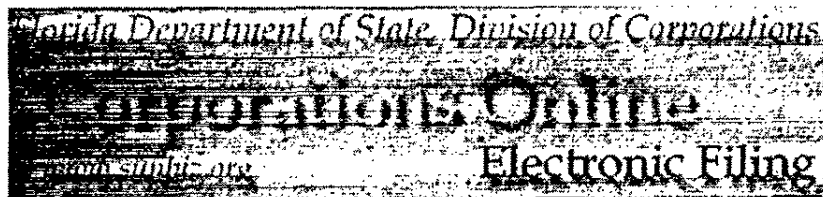
Linda Champagne

*Sworn to before me this 22 December 2005. Signed  
Linda Champagne.*

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



*Alfred Noel*  
*no tang*



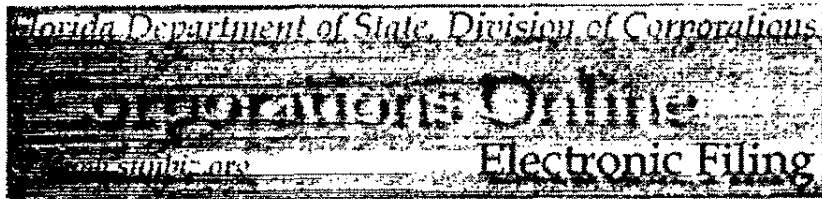
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**Online Payment System**

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<b>PAYMENT RECEIPT</b>	
<b>Transaction Amount:</b>	\$78.75
<b>Email Address:</b>	fchampagne@cfl.rr.com
<b>Date/Time Paid:</b>	12/19/2005 20:20:20
<b>Payment ID Number:</b>	10691194
<b>Reference Number:</b>	200062277952
<p>Thank you for using the <b>LINK 2 GOV</b> Online Payment System. <b>Print this receipt for your records.</b></p> <p><b>You MUST select continue in order to receive your CONFIRMATION from the State.</b></p>	

Continue



## Corporate Filing Payment

Thank you for filing your Corporate document online.

Your confirmation number is **200062277952**.

Your charge amount is **78.75**.

[Sunbiz Home Page](#)

[Help](#)

## COVER LETTER

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

SUBJECT: CLUB CARAMEL 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: LINDA CHAMPAGNE  
Name (Printed or typed)

1601 GLENHAVEN CIR  
Address

OCFEE, FL 34761  
City, State & Zip

407-248-4192  
Daytime Telephone number

05 DEC 29 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

CLUB CARAMEL INC.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1601 GLENHAVEN CIR  
OCOE FL 34761

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Promote Cultural events

### ARTICLE IV SHARES

The number of shares of stock is: 6 shares.

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

FRANTZ CHAMPAGNE 1601 Glenhaven Cir Ocoee, FL 34761 - Pres  
HUGUES MARCELIN 14567 Kristenright Lane Orlando, FL 32826 - VP  
LINDA CHAMPAGNE 1601 Glenhaven Cir Ocoee, FL 34761 - Treasurer  
RUTH LOISEAU 1000 SHOSHANNA DR. Orlando, FL 32825 - Secretary  
ERIKA METELLUS 14567 Kristenright Lane Orlando, FL 32826 - Director  
ARTICLE VI REGISTERED AGENT JOANES POLYNICE 14141 HAMPSHIRE BAY CIR  
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: WINTER GARDEN, FL 34787-DIRE

FRANTZ CHAMPAGNE  
1601 GLENHAVEN CIR OCOEE, FL 34761

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LINDA CHAMPAGNE  
1601 GLENHAVEN CIR OCOEE, FL 34761

\*\*\*\*\*

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

FRANTZ CHAMPAGNE  
*Frantz Champagne*  
Signature/Registered Agent

12/21/2005  
Date

*L Champagne*  
Signature/Incorporator  
LINDA CHAMPAGNE

12/21/05  
Date

05 DEC 29 AM 10:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA