

P06000035166

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06 MAR -9 AM 8:45  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CB 3-10-1

10377

## COVER LETTER

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

SUBJECT: Catherine M Silva, LLC

(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: Catherine M Silva

Name (Printed or typed)

632 Whippoorwill Drive

Address

Orlando, Fl. 32825

City, State & Zip

407-281-9259

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 2, 2006

CATHERINE M SILVA  
632 WHIPPOORWILL DR  
ORLANDO, FL 32825

SUBJECT: CATHERINE M SILVA  
Ref. Number: W06000010377

We have received your document for CATHERINE M SILVA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock.

The number of shares cannot be 0. please complete articles VI with persons name and article VII with address.,

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6925.

Cynthia Blalock  
Document Specialist  
New Filing Section

Letter Number: 306A00014747

**ARTICLES OF INCORPORATION**

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

FILED

06 MAR -9 AM 8:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I NAME**

The name of the corporation shall be:

Catherine M Silva, Inc

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

632 WHIPPOORWILL DRIVE  
ORLANDO, FLORIDA 32825

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

REMODELING AND REPAIRING HOMES

**ARTICLE IV SHARES**

The number of shares of stock is:

1

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

CATHERINE M SILVA, OWNER

Catherine M Silva,

**ARTICLE VI REGISTERED AGENT**

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

632 WHIPPOORWILL DRIVE Catherine M Silva  
ORLANDO, FL. 32825

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

CATHERINE M SILVA  
632 Whippoorwill Dr  
Orlando, FL 32825

\*\*\*\*\*

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

Catherine M. Silva  
Signature/Registered Agent

2/25/06  
Date

Catherine M. Silva  
Signature/Incorporator

2/25/06  
Date

Catherine M Silva, Inc