

P06000055875

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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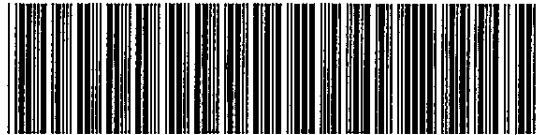
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/19/08--01012--002 \*\*78.75

FILED  
06 APR 19 PM 4:00  
CLERK OF COURT  
TALLAHASSEE, FLORIDA

**COVER LETTER**

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

SUBJECT: Clifford Cassidy incorporated  
(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: Clifford Cassidy  
Name (Printed or typed)

950 Post Lake Place #202  
Address

Apopka, FL 32703  
City, State & Zip

407-415-4296  
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: *Clifford Cassidy Incorporated*

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:  
→ *750 Post Lake Place #202  
Apopka, FL 32703*

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: *Cabinet Installation*

**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):  
*Clifford Cassidy Owner President Secretary*

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: *Clifford Cassidy  
750 Post Lake Plac  
→ Apopka, FL 32703 #202*

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is: *Clifford Cassidy  
750 Post Lake Place #202  
Apopka, FL 32703*

\*\*\*\*\*  
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

*Clifford Cassidy*  
\_\_\_\_\_  
Signature/Registered Agent

*Clifford Cassidy*  
\_\_\_\_\_  
Signature/Incorporator

*04-15-06*  
\_\_\_\_\_  
Date

*04-15-06*  
\_\_\_\_\_  
Date

FILED  
06 APR 19 PM 4:00  
CLERK OF STATE  
TALLAHASSEE, FLORIDA