

P06000078837

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

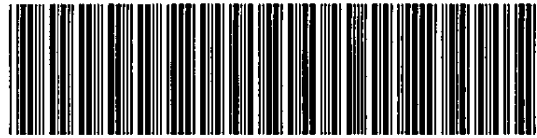
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06 JUN -6 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

pa

COVER LETTER

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

SUBJECT: G&M CEDRES 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: MARIA CEDRES

Name (Printed or typed)

180 NE 39TH COURT

Address

POMPANO BEACH FL 33064

City, State & Zip

954-464-0152

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:

G&M CEDRES INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

180 NE 39TH COURT
POMPANO BEACH FL 33064

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

DELIVERY SERVICE

ARTICLE IV SHARES

The number of shares of stock is:

500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MARIA CEDRES

ARTICLE VI REGISTERED AGENT

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

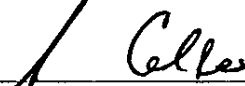
GABY CEDRES
180 NE 39TH COURT
POMPANO BEACH FL 33064

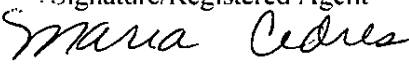
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MARIA CEDRES
180 NE 39TH COURT
POMPANO BEACH FL 33064

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

5-31-06
Date

5/31/06
Date

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06 JUN -6 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA