

PO6000112388

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

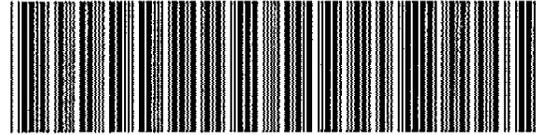
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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B. McKnight AUG 29 2006

**COVER LETTER**

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

**SUBJECT: Chancell Corporation**  
**(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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: John J. Garcia  
Name (Printed or typed)

452 Osceola Street, Suite 105  
Address

Altamonte Springs, Florida 32701  
City, State & Zip

407-265-9784  
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:

Chancell Corporation

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

452 Osceola Street, Suite 105, Altamonte Springs, Florida 32701

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Software Design

**ARTICLE IV SHARES**

The number of shares of stock is:

One Thousand

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

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

06 AUG 29 PM 1:29

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

John J. Garcia  
555 West Springtree Way  
Lake Mary, Florida 32746

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

John J. Garcia  
555 West Springtree Way  
Lake Mary, Florida 32746

\*\*\*\*\*

*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

08-24-06  
Date

08-24-06  
Date