

P06000116151

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

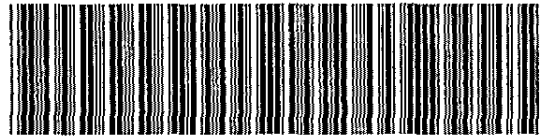
(Business Entity Name)

(Document Number)

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

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06 SEP -7 AM 10:53  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

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## TRANSMITTAL LETTER

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

SUBJECT: FACHI, 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: FACHI, Inc.

Name (Printed or typed)

540 Orange Drive, #14

Address

Altamonte Springs, FL 32701

City, State & Zip

1-800-226-0123

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)

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**ARTICLE I NAME**

The name of the corporation shall be:

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FACHI, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

540 Orange Drive, #14  
Altamonte Springs, FL 32701

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Home Inspections

**ARTICLE IV SHARES**

The number of shares of stock is:

100

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

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

Brooks Cobbum, President  
P. O. Box 151555  
Altamonte Spring, FL 32715

**ARTICLE VI REGISTERED AGENT**

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

Brooks Cobbum  
540 Orange Drive, #14  
Altamonte Springs, FL 32701

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Brooks Cobbum  
P. O. Box 151555  
Altamonte Springs, FL 32715

\*\*\*\*\*

*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*

Brooks Cobbum

Signature/Registered Agent

9-1-06

Date

Brooks Cobbum

Signature/Incorporator

9-1-06

Date