

Pd0000119896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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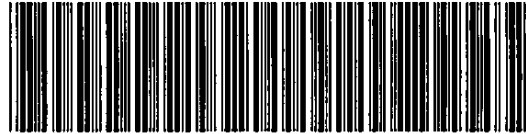
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/18/06--01030--025 **78.75

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06 SEP 18 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11

CR 9/13/06

COVER LETTER

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

SUBJECT: FALCON FRAMING, 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: AARON-MICHAEL DAVID LABRECQUE
Name (Printed or typed)

4765 INEZ
Address

HASTINGS, FL 32145
City, State & Zip

1-904-692-4086
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:

FALCON FRAMING, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

4765 INEZ
HASTINGS, FL 32145

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: THE TRANSACTION OF AND ALL LAWFUL BUSINESS FOR WHICH CORPORATION MAY BE INCORPORATED UNDER CHAPTER 607, FLORIDA STATUTES, AS AMENDED.

ARTICLE IV SHARES

The number of shares of stock is:

500. THE SHARES SHALL CONSIST OF ONE CLASS ONLY AND SUCH CLASS SHALL BE KNOWN AS "COMMON STOCK" OF THE CORPORATION, EACH SHARE SHALL HAVE A PAR VALUE OF \$1.00 PER SHARE.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

AARON-MICHAEL DAVID LABRECQUE - PRESIDENT
4765 INEZ
HASTINGS, FL 32145

ARTICLE VI REGISTERED AGENT

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

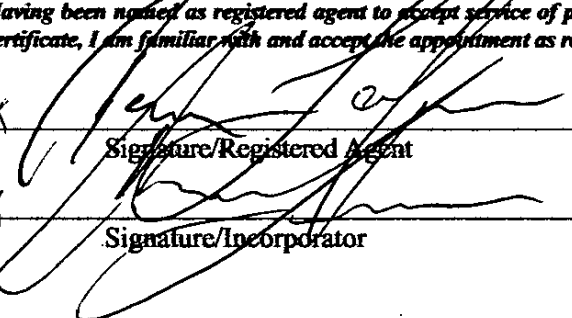
AARON-MICHAEL DAVID LABRECQUE
4765 INEZ
HASTINGS, FL 32145

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

AARON-MICHAEL DAVID LABRECQUE
4765 INEZ
HASTINGS, FL 32145

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

X 

Signature/Registered Agent

SEPT 13, 2006

Date

X 

Signature/Incorporator

SEPT 13, 2006

Date