

Pg 7000127889

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

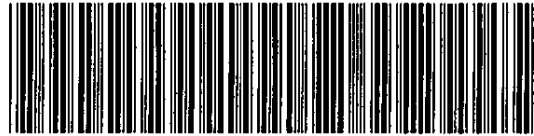
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED

2007 NOV 30 P 4: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-30-07
ee a

COVER LETTER

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

SUBJECT: **SANON TRANSFER, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

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

FROM: **SANON TRANSFER, INC.**
Name (Printed or typed)

2845 NORTH MILITARY TRAIL SUITE #5
Address

WEST PALM BEACH, FL 33409
City, State & Zip

561-615-3011
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:

SANON TRANSFER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2845 NORTH MILITARY TRAIL SUITE #5

WEST PALM BEACH, FL 33409

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY LEGAL PURPOSE

ARTICLE IV SHARES

The number of shares of stock is:

100 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

JEANNOT SANON

6079 FAIRGREEN ROAD

WEST PALM BEACH FL 33417

PRESIDENT

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

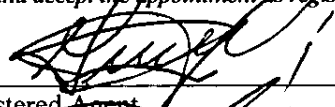
JEANNOT SANON
6079 FAIRGREEN ROAD
WEST PALM BEACH FL 33417

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

JEANNOT SANON
6079 FAIRGREEN ROAD
WEST PALM BEACH FL 33417

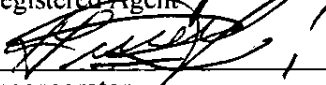
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

11-28-07

Date



Signature/Incorporator

11-28-07

Date