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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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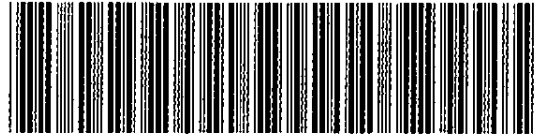
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: Zacona International, 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: Jeffrey K Clarke

Name (Printed or typed).

11742 Layton Street

Address

Leesburg, Fl. 34788

City, State & Zip

321.214.0026

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:

Zacona International, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

11742 Layton Street, Leesburg, FL 34788

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Hospitality Services

ARTICLE IV SHARES

The number of shares of stock is:

1000 Common Stock with No par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jeffrey K Clarke, 11742 Layton Street, Leesburg, FL 34788, President & CEO

Elda D Clarke, 11742 Layton Street, Leesburg, FL 34788, Vice-President & Treasurer

ARTICLE VI REGISTERED AGENT

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

Jeffrey K Clarke, 11742 Layton Street, Leesburg, FL 34788

ARTICLE VII INCORPORATOR


The name and address of the Incorporator is:

Jeffrey K Clarke, 11742 Layton Street, Leesburg, FL 34788

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

6/19/08
Date


Signature/Incorporator

6/19/08
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA