

PD8000063507

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

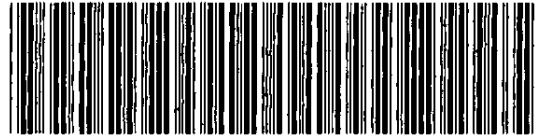
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRD  
7/2

## COVER LETTER

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

**SUBJECT:** El Campeon 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:** Victor M. Ramos

Name (Printed or typed)

PO Box 390214

Address

Deltona, FL 32739

City, State & Zip

786-261-4380

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:

El Campeon Inc.

**ARTICLE II PRINCIPAL OFFICE**

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

Principal  
215 West College Ave. #401  
Tallahassee, FL 32306

Mailing  
PO Box 390214  
Deltona, FL 32739

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and All Lawful Business

**ARTICLE IV SHARES**

The number of shares of stock is:

150

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

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

Title: P  
James R. Coley III  
215 West College Ave. #401  
Tallahassee, FL 32306

Title: VP  
Victor M. Ramos  
PO Box 390413  
Deltona, FL 32738

**ARTICLE VI REGISTERED AGENT**

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

Victor M. Ramos  
1540 Howland Blvd.  
Deltona, FL 32738

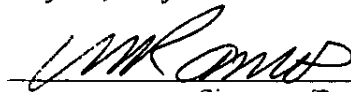
**ARTICLE VII INCORPORATOR**

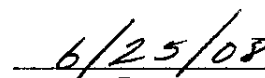
The name and address of the Incorporator is:

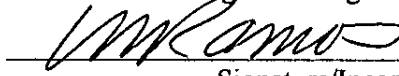
Victor M. Ramos  
1540 Howland Blvd.  
Deltona, FL 32738

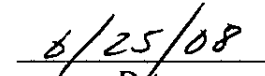
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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
\_\_\_\_\_  
Signature/Registered Agent

  
\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

  
\_\_\_\_\_  
Date

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