

PA9 000033471

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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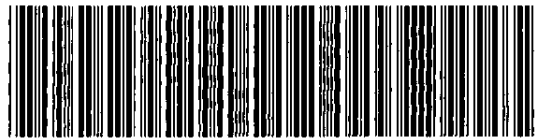
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09 APR 13 AM 7:46

SECRETARY OF STATE
CORPORATE SERVICES DIVISION

RH

COVER LETTER

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

SUBJECT: CHICO BAIL BONDS 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: CHICO BAIL BONDS INC.

Name (Printed or typed)

1399 N.W. 17 AVE SUITE 304

Address

MIAMI, FLORIDA 33125

City, State & Zip

305-325-9444

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:

CHICO BAIL BONDS INC.

ARTICLE II PRINCIPAL OFFICE

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

1399 NW 17 AVE SUITE 304
MIAMI, FLORIDA 330125

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BAIL BONDS

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

DANIEL VILLAVERDE
1399 NW 17 AVE SUITE 304
MIAMI, FLORIDA 33125

President

ANGEL BOADA
1399 NW 17 AVE SUITE 304
MIAMI, FLORIDA 33125

Vice President

ARTICLE VI REGISTERED AGENT

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

DANIEL VILLAVERDE
1399 NW 17 AVE SUITE 304
MIAMI, FLORIDA 33125

ARTICLE VII INCORPORATOR

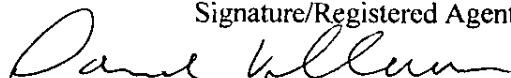
The name and address of the Incorporator is:

DANIEL VILLAVERDE
1399 NW 17 AVE SUITE 304
MIAMI, FLORIDA 33125

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 DANIEL VILLAVERDE



Signature/Incorporator DANIEL VILLAVERDE

04/07/09

Date

04/07/09

Date

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SECRETARY OF STATE
MIAMI, FLORIDA