

P090000035849

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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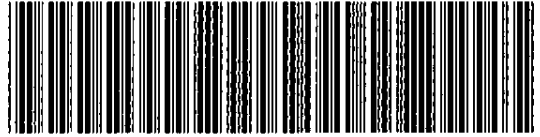
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2009 APR 21 A 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-23-09
[Signature]
WLC



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2009

ARIEL LEON
5470 W. 2ND AVE.
HIALEAH, FL 33012

SUBJECT: LEON PLUMBING CO.
Ref. Number: W09000016698

We have received your document for LEON PLUMBING CO. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6995.

Wanda Cunningham
Regulatory Specialist II
New Filing Section

Letter Number: 609A00012000

COVER LETTER

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

SUBJECT: Leon Plumbing Co.

(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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Ariel Leon
Name (Printed or typed)

5470 W 2nd Avenue
Address

Hialeah, FL 33012
City, State & Zip

786-229-7058
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:

Leon Plumbing Co.

ARTICLE II PRINCIPAL OFFICE

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

5470 W 2nd Ave
Hialeah Florida 33012.

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Plumbing

ARTICLE IV SHARES

The number of shares of stock is:

1 share

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Ariel Leon 5470 W 2nd Avenue, Hialeah, FL 33012 - President

Magby Leon 874 W 69th Street, Hialeah, FL 33014 - Vice President

Caridad Leon 5470 W 2nd Avenue, Hialeah, FL 33012 - Treasurer

ARTICLE VI REGISTERED AGENT

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

Caridad Leon

5470 W 2nd Avenue

Hialeah, FL 33012

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ariel Leon

5470 W 2nd Avenue

Hialeah, FL 33012

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

Caridad Leon Caridad Leon

Signature/Registered Agent

4/2/09

Date

Ariel Leon

Signature/Incorporator

4/2/09

Date

2009 APR 21 A 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED