

P09000035891

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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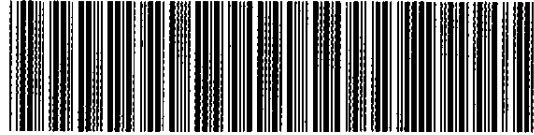
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4-23-09
WC

COVER LETTER

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

SUBJECT: Camayd Consultants 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

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

FROM: Arthur Camayd
Name (Printed or typed)

8030 SW 99 ave
Address

Miami, FL 33173
City, State & Zip

305-608-4942
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:

Camayd Consultants Inc.

ARTICLE II PRINCIPAL OFFICE

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

8030 SW 99 Ave.
Miami, FL 33173

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct any business lawfully.

ARTICLE IV SHARES

The number of shares of stock is:

100 shares at \$1.00 per value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Arthur Camayd, President, 8030 SW 99 AVE Miami, FL 33173
Marcia Camayd, Secretary, 8030 SW 99 AVE Miami, FL 33173
Ramon F. Camayd, Treasurer, 8030 SW 99 AVE Miami, FL 33173
Abraham Camayd, VP, 8030 SW 99 AVE Miami, FL 33173

ARTICLE VI REGISTERED AGENT

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

Arthur Camayd
8030 SW 99 Ave
Miami, FL 33173

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Arthur Camayd
8030 SW 99 Ave
Miami, FL 33173

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

Signature/Incorporator

04/16/2009
Date

04/16/2009
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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