

P10000102361

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

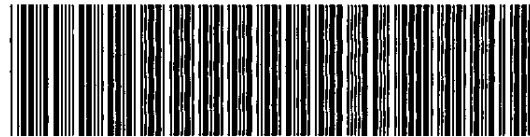
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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12/20/10--01020--031 \*\*87.50

FILED  
2010 DEC 20 PM 12:24  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers DEC 21 2010

COVER LETTER

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

SUBJECT: Francoeur Enterprises 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: Mary Louise Francoeur  
Name (Printed or typed)

P.O. Box 30055  
Address

Palm Beach Gardens, FL 33420  
City, State & Zip

772-318-9648  
Daytime Telephone number

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

**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: **Francœur Enterprises, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**3567 91st Street N.**  
**Palm Beach Gardens**  
**Florida 33403**

Mailing address, if different is:  
**P.O. Box 30055**  
**Palm Beach Gardens**  
**Florida 33420**

**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: **10,000**

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

Name and Title: <b>Mary Louise Francœur, President</b>	Name and Title: _____
Address: <b>P.O. Box 30055</b>	Address: _____
<b>Palm Beach Gardens, FL</b>	_____
<b>33420</b>	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

**ARTICLE VI REGISTERED AGENT**

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

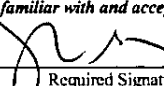
Name: **Mary Louise Francœur**  
Address: **3567 91st Street N.**  
**Palm Beach Gardens, FL 33403**

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

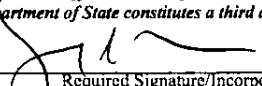
Name: **Mary Louise Francœur**  
Address: **3567 91st Street N.**  
**Palm Beach Gardens, FL 33403**

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

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

**12/15/10**  
\_\_\_\_\_  
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

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

**12/15/10**  
\_\_\_\_\_  
Date

SECRETARY OF STATE  
FILED/RECEIVED

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