

P11000018545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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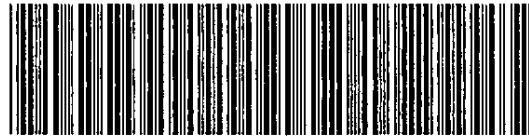
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers FEB 23 2011
W11-7312
671

COVER LETTER

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

SUBJECT: Custom Fine Carpentry, 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: Orlando Infantas

Name (Printed or typed)

5911 NW 69th Avenue

Address

Tamarac, FL 33321

City, State & Zip

954 297-4194

Daytime Telephone number

orlando620@hotmail.com

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

SECRETARY OF STATE
TALLAHASSEE, FL 32314

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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

Custom Fine Carpentry, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
5911 NW 69th Avenue
Tamarac, FL 33321

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To performed by custom work in the carpentry industry

ARTICLE IV SHARES

The number of shares of stock is 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Orlando Infantas, Owner/President
Address: 5911 nw 69th avenue
Tamarac, FL 33321

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Orlando Infantas
Address: 5911 NW 69th Avenue
Tamarac, FL 33321

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Orlando Infantas
Address: 5911 NW 69th Avenue
Tamarac, FL 33321

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

Orlando Infantas
Required Signature/Registered Agent

01/25/2011
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.

Orlando Infantas
Required Signature/Incorporator

01/25/2011
Date

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