

P11000050943

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

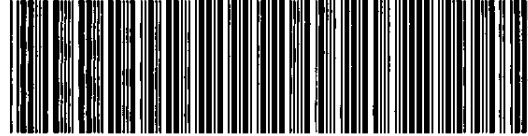
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600207983976

05/27/11--01013--008 **70.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAY 27 PM 12:57

RECEIVED
MAY 27 2011

5/31
PB

COVER LETTER

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

SUBJECT: **Renovation By Carl 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: **Nathalie Menard**

Name (Printed or typed)

2805 Dr. MLKing jr St N

Address

St-Petersburg FL 33704

City, State & Zip

727 418 2513

Daytime Telephone number

nathalie@hypericflorida.com

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

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: Renovation By Carl Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
2805 Dr. MLKing Jr St N
Saint Petersburg FL 33704

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Home Renovation

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nathalie Menard
Address: 279 8th Ave North
Tierra Verde FL 33715

Name and Title: _____
Address: _____

Name and Title: Carl Menard
Address: 279 8th Ave North
Tierra Verde FL 33715

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: Nathalie Menard
Address: 279 8th Ave North
Tierra Verde FL 33715

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nathalie Menard
Address: 279 8th Ave North
Tierra Verde FL 33715

RECEIVED
11 MAY 27 PM 12:57
TALLAHASSEE, FLORIDA

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

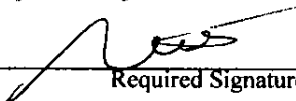


Required Signature/Registered Agent

5-23-2011

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.



Required Signature/Incorporator

5-23-2011

Date