

P110000053229

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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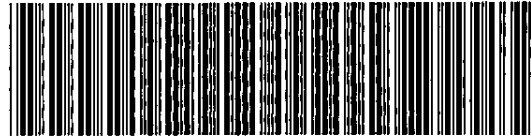
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2011 JUN -6 PM:2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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SC
6-7-11

COVER LETTER

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

SUBJECT: Frankeys Agency Services 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: Waldemar Franquiz

Name (Printed or typed)

P.O. Box 1122

Address

Davenport Florida 33836

City, State & Zip

321-514-9941

Daytime Telephone number

wallyfranquiz@gmail.com

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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SECRETARY OF STATE
TALLAHASSEE, FL 32314

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME Frankeys Agency Services INC
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
764 China Berry Circle
Davenport Florida 33837

Mailing address, if different is:
P.O. Box 1122
Davenport Florida 33837

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
To provide general Florida real estate agency services to general public

ARTICLE IV SHARES
The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Waldemar Franquiz</u>	Name and Title: _____
Address: <u>P.O. Box 1122</u>	Address: _____
<u>Davenport Florida 33836</u>	_____
_____	_____
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: Waldemar Franquiz
Address: 764 China Berry Circle
Davenport, Florida 33837

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Waldemar Franquiz
Address: P.O. Box 1122
Davenport Florida 33836

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ALLAHABAD, INDIA

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

Waldemar Franquiz 5/31/2011
Required Signature/Registered Agent 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.

Waldemar Franquiz 5/31/2011
Required Signature/Incorporator Date