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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 06/08/11

COVER LETTER

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

SUBJECT: Charles J. Winston, 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: Charles J. Winston

Name (Printed or typed)

945 Symphony Isles Blvd.

Address

Apollo Beach, FL 33572

City, State & Zip

813-727-3040

Daytime Telephone number

Charles@Charleswinston.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

Charles J. Winston, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
945 Symphony Isles Blvd.
Apollo Beach, FL 33572

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Wholesale and retail of precious and non-precious jewelry

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Charles J. Winston - CEO
Address: 945 Symphony Isles Blvd.
Apollo Beach, FL 33572

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: Charles J. Winston
Address: 945 Symphony Isles Blvd.
Apollo Beach, FL 33572

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Charles J. Winston
Address: 945 Symphony Isles Blvd.
Apollo Beach, FL 33572

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

June 2, 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

June 2, 2011

Date

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