

P11000077312

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

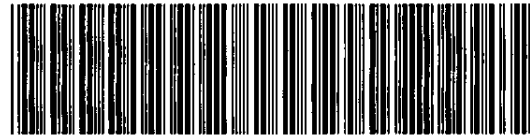
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/29/11--01007--001 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 AUG 29 PM 3:29

APPROVED
8/29/11

8/31
88

COVER LETTER

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

SUBJECT: HC Sanabria Corporation

(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: Cassandra Sanabria

Name (Printed or typed)

24441 SW 110 Avenue

Address

Princeton, Florida 33032

City, State & Zip

(305)546-2332

Daytime Telephone number

hcsanabriacorp@gmail.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

HC Sanabria Corporation
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
24441 SW 110 Avenue
Princeton, Florida 33032

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
provide delivery and assembly services

ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Hector R Sanabria, President
Address: 24441 SW 110 Avenue
Princeton, Florida 33032

Name and Title: _____
Address: _____

Name and Title: Cassandra M Sanabria, Vice President
Address: 24441 SW 110 Avenue
Princeton, Florida 33032

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: Cassandra M Sanabria
Address: 24441 SW 110 Avenue
Princeton, Florida 33032

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:


Name: Cassandra M Sanabria
Address: 24441 SW 110 Avenue
Princeton, Florida 33032

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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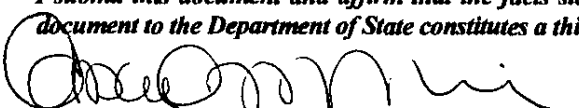
RECEIVED

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

August 24, 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

8/24/11
Date