

P120000027067

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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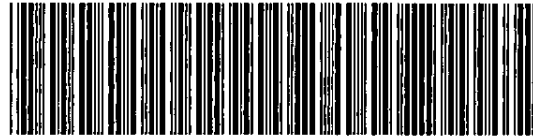
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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PHOTO  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 MAR 16 PM 12:04

3/20

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## COVER LETTER

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

SUBJECT: CEP ASSOCIATES, 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: Peter DeAngelis  
Name (Printed or typed)

5700 Verlaine Court  
Address

Tallahassee, Florida 32308  
City, State & Zip

850-942-6531  
Daytime Telephone number

gmeros@gray-robinson.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** CEP ASSOCIATES, INC.

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
5700 Verlaine Court  
Tallahassee, Florida 32308

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
to conduct business in Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 100 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title:	Peter DeAngelis, President	Name and Title:	
Address:	5700 Verlaine Court	Address:	
	Tallahassee, Florida 32308		

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: Peter DeAngelis  
Address: 5700 Verlaine Court  
Tallahassee, Florida 32308

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Peter DeAngelis  
Address: 5700 Verlaine Court  
Tallahassee, Florida 32308

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

Peter De Angelis

Required Signature/Registered Agent

3/15/12  
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.

Peter De Angelis

Required Signature/Incorporator

3/15/12  
Date

12 MAR 16 PM 12:04  
STATE OF FLORIDA  
DEPARTMENT OF STATE