

(Requestor's Name)				
(Address)	—			
(Address)	_			
(Addiess)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Business Entity Marile)				
(Document Number)				
Certified Copies Certificates of Status				
	_			
Special Instructions to Filing Officer:				
·	1			
	-			
	1			

Office Use Only



800226182298

03/26/12--01047--006 \*\*\*78.75

FILED
2012 APR -6 AM 10: 115
FALLAHASSEE, FLORIES

J. Shivers APR 0 9 2012





## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 28, 2012

NOEL GONZALEZ PO BOX 2429 LAKE WALES, FL 33859

SUBJECT: NOEL GONZALEZ & CO. INC.

Ref. Number: W12000017453

We have received your document for NOEL GONZALEZ & CO. INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Justin M Shivers Regulatory Specialist II New Filing Section

Letter Number: 712A00010421

## **COVER LETTER**

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

SUBJECT: NOEL GONZAIEZ & CO, 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  ADDITIONAL CO	& Certificate of Status					
FROM:	Noel H.Gonzalez Name (	Printed or typed)	TALLA	2012 /				
	P.o box 2429  LAKE Walts  City,	Address  1 FC 3385  State & Zip	AHASSEE, FLORIDA	2012 APR -6 AM 10: 15				
863.678.3034  Daytime Telephone number								

NOTE: Please provide the original and one copy of the articles.

ARTICEES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit	3)
ARTICLE I NAME	,
The name of the corporation shall be:	
NOEL GONZAIEZ & CO, INC.	
ARTICLE II PRINCIPAL OFFICE	
The principal street address and mailing address, if different is:	
P.O box 2429- LAKE WALES, FC 33855	/
> 6458 Deland Ave. Unit #3-4	ake wates, FC 33855 -054
ARTICLE III PURPOSE	:
The purpose for which the corporation is organized is:	The state of the s
Any and lawful business IN The STATE of FLORIDA, USA	
•	
ARTICLE IV SHARES	
The number of shares of stock is: 6000	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTO	<u>DRS</u>
List name(s), address(es) and specific title(s):	
Noel H.Gonzalez - p.o box 2429 - LAKE WALES, FL 336	75 9
	·
<u>ARTICLE VI REGISTERED AGENT</u>	7A. S
The name and Florida street address (P.O. Box NOT acceptable)	of the registered agent is:  \$\frac{2012}{APR} - 6
Noel H. Gonzalez 6458 Deland AVE. UNIT#3	HAR APR
- · · · · · · · · · · · · · · · · · · ·	SSS
INDIAN LAKE ESTATES, FL 33855	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is: loel H. Gonzalez - p.o. box 2429 - LAKE WALES, FL 33869	ORIDA ORIDA
7	> N
************	***********
Having been named as registered agent to accept service of process for the ab	ove stated corporation at the place designated in this
certificate, I am familiar with and accept the appointment as registered agent an	
	04 62 2012
Signature/Registered Agent	Date 1
100	01/ 100 / 240
	V4 100 1000
Signature/Incorporator	' Date