

P12000053001

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(Business Entity Name)

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Special Instructions to Filing Officer:

Office Use Only

2544-

W12000026342



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05/10/12--01018--013 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 JUN 11 PM 2:47

6/13/12

TRANSMITTAL LETTER

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

SUBJECT: ABLE FINANCE OF FLORIDA INC
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: NORMAN KAGAN
Name (Printed or typed)

2431 WESTWOOD DRIVE
Address

LONGWOOD, FLORIDA, 32779
City, State & Zip

407-869-7753
Daytime Telephone number

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

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

12 JUN 11 AM 10:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 11, 2012

NORMAN KAGAN
2431 WESTWOOD DRIVE
LONGWOOD, FL 32779

SUBJECT: ABLE FINANCE OF FLORIDA, INC
Ref. Number: W12000026342

We have received your document for ABLE FINANCE OF FLORIDA, 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please add a space between the name of the corporation and the suffix.

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.

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 712A00014126

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ARTICLES OF INCORPORATION

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ARTICLE I NAME

THE NAME OF THE CORPORATION SHALL BE
ABLE FINANCE OF LONGWOOD, INC.
THE PRINCIPLE PLACE OF BUSINESS OF THIS CORPORATION IS
2431 WESTWOOD DRIVE, LONGWOOD, FLORIDA, 32779

ARTICLE II NATURE OF BUSINESS

THE CORPORATION MAY ENGAGE IN OR TRANSACT ANY AND ALL
LAWFUL ACTIVITIES OR BUSINESS PERMITTED UNDER THE LAWS OF THE
UNITED STATES, THE STATE OF FLORIDA, OR ANY OTHER
STATE, COUNTRY, TERRITORY OR NATION.

ARTICLE III CAPITAL STOCK

THE AGGREGATE NUMBER OF SHARES OF STOCK AND ITS PAR VALUE
THAT THIS CORPORATION IS AUTHORIZED TO HAVE OUTSTANDING AT
ANY ONE TIME IS:

500 SHARES AT \$ 1.00 EACH.

ARTICLE IV TERM OF EXISTENCE

THE CORPORATION IS TO EXIST PERPETUALLY.

ARTICLE V OFFICERS DIRECTORS

THE NAME(S) AND STREET ADDRESS(ES) OF THE INITIAL OFFICER(S) AND
DIRECTOR(S), IF ANY, WHO SHALL HOLD OFFICE THE FIRST YEAR OF THE
CORPORATION'S EXISTENCE OR UNTIL THEIR SUCCESSOR(S)
IS(ARE) ELECTED, IS(ARE):

.. JANICE KAGAN
2431 WESTWOOD DRIVE
LONGWOOD, FLORIDA, 32779

ARTICLE VI INCORPORATORS

THE NAME (S) AND STREET ADDRESS(ES) OF THE INCORPORATOR(S) TO
THIS ARTICLES OF INCORPORATION IS(ARE)

JANICE KAGAN
2431 WESTWOOD DRIVE
LONGWOOD,FLORIDA,32799

IN WITNESS WHEREOF, THE
UNDERSIGNED INCORPORATOR(S) HAS (HAVE)EXECUTED THESE ARTICLES
OF INCORPORATION THIS 5TH DAY OF JUNE 2012.

SIGNATURE(S) OF INCORPORATOR(S)

Janice Kagan

STATE OF FLORIDA,

COUNTY SEMINOLE

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED AND SWORN TO
BEFORE ME THIS 5TH DAY OF JUNE 2012 James Kagan
OF ABLE FINANCE OF LONGWOOD, INC.

NOTARY PUBLIC

MY COMMISSION EXPIRES



Norman Kagan
NORMAN KAGAN
MY COMMISSION # DD 893572
EXPIRES: September 27, 2013
Bonded Thru Budget Notary Services

CERTIFICATE DESIGNATING REGISTERED AGENT/REGISTERED
OFFICE.

PURSUANT TO THE PROVISIONS OF SECTION 607.325, FLORIDA
STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE
LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT
IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

1.THE NAME OF THE CORPORATION IS:
ABLE FINANCE OF LONGWOOD,INC..

2.THE NAME AND ADDRESS OF THE REGISTERED AGENT AND OFFICE IS:

JANICE KAGAN
2431 WESTWOOD DRIVE
LONGWOOD,FLORIDA,32779

SIGNATURE Janice Kagan
CORPORATE OFFICER

TITLE__PRESIDENT_____

DATE_JUNE 5TH,2012

HAVING BEEN NAMED TO ACCEPTS SERVICE OF PROCESS FOR THE ABOVE
STATED CORPORATION, AT THE PLACE DESIGNATED IN THIS CERTIFICATE,
I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER AGREE TO
COMPLY WITH THE PROVISIONS OF ALL; STATUTES RELATIVE TO THE
PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I ACCEPT
THE DUTIES AND OBLIGATIONS OF SECTION 607.325 FLORIDA STATUTES.

SIGNATURE Janice Kagan
REGISTERED AGENT

DATE_JUNE 5TH ,2012

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