

PI2000087648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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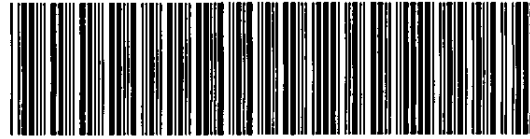
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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98

012-51017

COVER LETTER

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

SUBJECT: Cadeau & Company

(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: Susan K Moyer

Name (Printed or typed)

1469 Paloma Drive

Address

Fort Myers, FL 33901

City, State & Zip

239-229-7226

Daytime Telephone number

smoyer.biz@gmail.com ✓

E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

12 OCT 15 PM 12:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 4, 2012

SUSAN K MOYER
1469 PALOMA DR
FORT MYERS, FL 33901

SUBJECT: CADEAU & COMPANY
Ref. Number: W12000051017

We have received your document for CADEAU & COMPANY and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return 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.

Jessica A Fason
Regulatory Specialist II

Letter Number: 012A00024647

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be: Cadeau & Company, INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
2724 Oakridge Court
Suite 603-C
Fort Myers, FL 33901

Mailing address, if different is:

PO Box 6486
Fort Myers, 33911

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Business Brokerage, Real Estate Brokerage, and Consulting / SALES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Susan K Moyer, President Name and Title: _____
Address: PO Box 6486 Address: _____
Fort Myers, FL 33911

Name and Title: Susan K Moyer, Secretary - Treasurer Name and Title: _____
Address: P.O. Box 6486 Address: _____
Fort Myers, FL 33901

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: Susan K Moyer
Address: 1469 Paloma Drive
Fort Myers, FL 33901

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Susan K Moyer
Address: 1469 Paloma Drive
Fort Myers, FL 33901

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

Susan K. Moyer
Required Signature/Registered Agent

Oct. 1, 2012
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.

Susan K. Moyer
Required Signature/Incorporator

Oct. 1, 2012
Date

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TALLAHASSEE, FLORIDA