

P12000102254

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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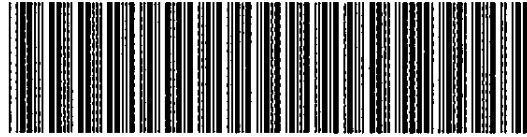
(Business Entity Name)

(Document Number)

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

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12 DEC 14 AM 7:39  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

12/17  
8

## COVER LETTER

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

SUBJECT: **CHAMELEON ADVISORS, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

☐ \$78.75      ☐ \$87.50  
Filing Fee      Filing Fee,  
& Certified Copy      Certified Copy  
                         & Certificate of  
                         Status

**ADDITIONAL COPY REQUIRED**

FROM: **H. LEE WALL**

Name (Printed or typed)

**212 E HIGHLAND DR STE 201**

Address

**LAKELAND, FL 33813**

City, State & Zip

**863-683-0708**

Daytime Telephone number

**lwall@wallfoss.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**

The name of the corporation shall be: **CHAMELEON ADVISORS, INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
212 E HIGHLAND DR, STE 201  
LAKELAND, FL 33813

Mailing address, if different is:  
212 E HIGHLAND DR, STE 201  
LAKELAND, FL 33813

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **ANY AND ALL LAWFUL BUSINESS**

**ARTICLE IV SHARES**

The number of shares of stock is: **1000**

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

Name and Title: H. LEE WALL, PRESIDENT  
Address: 212 E HIGHLAND DR, STE 201  
LAKELAND, FL 33813

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_

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: H. LEE WALL  
Address: 212 E HIGHLAND DR, STE 201  
LAKELAND, FL 33813

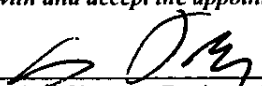
**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: H. LEE WALL  
Address: 212 E HIGHLAND DR, STE 201  
LAKELAND, FL 33813


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*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

12-12-12  
\_\_\_\_\_  
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.*

  
\_\_\_\_\_  
Required Signature/Incorporator

12-12-12  
\_\_\_\_\_  
Date