## P13000023769

(Requestor's Name)			
(A	ddress)		
(A	ddress)		
(C	ity/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL	
(B	Susiness Entity Name)		
(□	ocument Number)		
Certified Copies	Certificates of	Status	
Special Instructions to	o Filing Officer:		
!			
		·	





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03/13/13--01024--008 \*\*78.75



## **COVER LETTER**

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

SUBJECT: Cha	a Enterprises, Inc	; TE NAME – MUST INCL	UDF SUFFIX)	<del></del>		
	(I NOI ODED COM ON	MOST RICE	ODE BOILES			
Enclosed are an ori	ginal and one (1) copy of the art	icles of incorporation and	d 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 CO	PY REQUIRED			
FROM:	la Roda			50		
_	Name	e (Printed or typed)	_	EC.	ω <u>₹</u>	
2	514 Tuscarora Ti	rail		また	13 MAR 13	-m-, -m;
		Address		新五		
<u>N</u>	laitland, FL 3275			FLOH FLOH	PH 12: 4	D'
	City,	State & Zip		호텔	1 1	
4	07-459-4843					
	Daytime T	elephone number				
h	a@haroda.com					
<del></del>		d 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 NAM The name of the corporat	E Cha Enterprises	, Inc	
ARTICLE II PRI	NCIPAL OFFICE Principal <u>street</u> address		Mailing address, if different is:
Maitland, FL 3	32751		
ARTICLE III PUR The purpose for which the	POSE he corporation is organized is:	ge real esta	te properties
	-		
			70 W
	RES stock is: 25,000 TAL OFFICERS AND/OR DIRECTO Ha Roda, President	ORS	HAR 13 FM I2: 4 FF STATE OF STATE FLORIDE
Address	2514 Tuscarora Trail	Address:	2514 Tuscarora Trail
Aumess	Maitland, FL 32751	Address.	Maitland, FL 32751
Name and Title:		Name and Title	
Address		Address:	
Name and Title:		Name and Title	
Address		Address:	

Name an	d Title:	Name and Title:	
Address	<u></u>	Address:	
ARTICLE VI	REGISTERED AGENT		
The <u>name and F</u>	lorida street address (P.O. Box NOT acceptable)	of the registered agent is:	
Name:	Ha Roda	_	
Address	2514 Tuscarora Trail		
	Maitland, FL 32751		
ARTICLE VII	<u>INCORPORATOR</u>		
The <u>name and a</u>	ddress of the Incorporator is:		
Name:	Ha Roda	<del></del>	
Address:	2514 Tuscarora Trail	_	
	Maitland, FL 32751	_	
		_	
Having been nar this certificate, I	med as registered agent to accept service of proce am familiar with and accept the appointment as r	ss for the above stated corporation at egistered agent and agree to act in thi	t the place designated in S <sub>e</sub> capacity
•		Λ	1 0013
	Required Signature/Registered Agent		Date 11, 2015
	cument and affirm that the facts stated herein as Department of State constitutes a third degree fel		ormation submitted in a
			Mar. 11. 2013
.=	Redufied Signature/Incorporator		Date
			SEC SEC
			SE G
			13 MAR 13 PH 12: 4 SECHEDARY OF STATE MILAHASSEE FLORID
			21. 21. 21. 4. 12.