

P13000055686

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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

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FILED  
13 JUN 27 PM 3:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W13 - 33923

✓ 06/28/13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 11, 2013

JUAN FERNANDO CALE  
9159 SW 157TH CT.  
MIAMI, FL 33196

SUBJECT: CALE DISTRIBUTORS CORP.  
Ref. Number: W13000033923

RECEIVED  
13 JUN 27 AM 11:35  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

We have received your document for CALE DISTRIBUTORS CORP. 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 person designated as incorporator in the document and the person signing as incorporator must be the same.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

It appears as if there are two (2) different people listed for Registered Agent and for the Incorporator, but the signature appears to be the same.

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.

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 213A00014678

## COVER LETTER

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

SUBJECT: **CALE DISTRIBUTORS, CORP.**

(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: JUAN FERNANDO CALE  
Name (Printed or typed)

9159 SW 157TH CT.  
Address

MIAMI, FL. 33196  
City, State & Zip

786-390-6278  
Daytime Telephone number

JUANCALE85@HOTMAIL.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:

CALE DISTRIBUTORS CORP.

**ARTICLE II PRINCIPAL OFFICE**

Principal Street Address:

9159 SW 157<sup>TH</sup> CT.

MIAMI, FL. 33196

Mailing Address if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

**ARTICLE IV**

The number of shares of stock is: 100 SHARES

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

Name and Title: **JUAN FERNANDO CALE** -PRESIDENT

Address:

9159 SW 157<sup>TH</sup> CT.

MIAMI, FL. 33196

Name and Title: **JOHN F. CALE** -VP

Address:

9159 SW 157<sup>TH</sup> CT

MIAMI, FL. 33196

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TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

The name and Florida Street address (P.O. Box NOT acceptable of the registered agent is:

Name:

JOHN F CALE

Address:

9159 SW 157<sup>TH</sup> CT.

MIAMI, FL. 33196

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name:

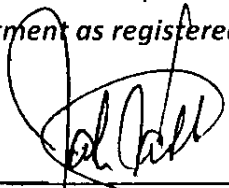
JUAN FERNANDO CALE

Address:

9159 SW 157<sup>TH</sup> CT.


MIAMI, FL. 33196

*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*

X   
\_\_\_\_\_  
Required Signature/Registered Agent

06/05/13  
Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

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

06/05/13  
Date

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13 JUN 27 PM 3:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA