

P13000063223

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

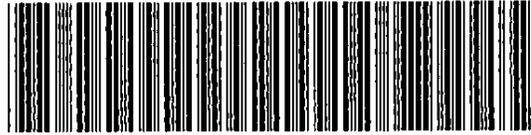
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/24/13--01026--012 **78.75

WB-36671

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FILED
13 JUL 26 PM 4: 26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch JUL 31 2013

COVER LETTER

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

SUBJECT: Vadon Enterprise, 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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: Carlos Vadon
Name (Printed or typed)

2064 Sun Down Dr.
Address

Clearwater, FL 33763
City, State & Zip

(727) 709-6892
Daytime Telephone number

lacasamia1234@gmail.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 25, 2013

CARLSON VADON
2064 SUN DOWN DR
CLEARWATER, FL 33763

SUBJECT: VADON ENTERPRISE, INC.
Ref. Number: W13000036671

We have received your document for VADON ENTERPRISE, 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 Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

A corporation may not act as its own incorporator. Please designate an individual, another active domestic or foreign corporation, with a street address.

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.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 313A00015929

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: Vadon Enterprise, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

~~Carlos Vadon~~
2064 Sun Down Dr
Clearwater FL 33763

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to perform the best possible inspections and 4life distributions.

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13 JUL 26 PM 4: 26
SECRETARY OF STATE
TALLAHASSEE, FL 32399

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Carlos Vadon, President Name and Title: _____

Address: 2064 Sun Down Dr. Address: _____
Clearwater, FL 33763

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

(conti.)

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: Carlos Vadon
 Address: 2064 Sun Down Dr.
Clearwater, FL 33763

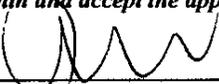
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 TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Carlos Vadon
 Address: 2064 Sun Down Dr.
Clearwater, FL 33763

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

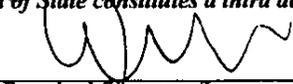


 Required Signature/Registered Agent

06/15/2013

 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

06/15/2013

 Date