

P14000020530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

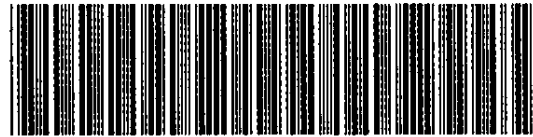
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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03/05/14--01019--002 \*\*70.00

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAR -5 PM 12:09

*[Handwritten signature]*  
3-6-14

**COVER LETTER**

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

**SUBJECT:** Cadwallader, 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

☐ \$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

**FROM:** Lindsey Cadwallader

Name (Printed or typed)

1834 Main Street

Address

Sarasota, Florida 34236

City, State & Zip

765-414-4046

Daytime Telephone number

lindsey.cadwallader@gmail.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)

SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
14 MAR -5 PM 12:08

**ARTICLE I NAME**

The name of the corporation shall be: Cadwallader, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

1834 Main Street

Sarasota, Florida 34236

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: This Corporation is formed to conduct  
and transact all lawful business activities allowed under the State  
of Florida.

**ARTICLE IV SHARES**

The number of shares of stock is: 500

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

Name and Title: Lindsey Cadwallader, President

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

Address 1834 Main Street

Address: \_\_\_\_\_

Sarasota, Florida 34236

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: Lindsey Cadwallader

Address: 1834 Main Street  
Sarasota, Florida 34236

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Lindsey Cadwallader

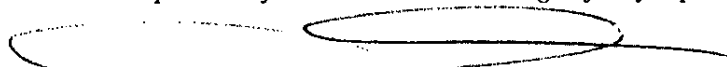
Address: 1834 Main Street  
Sarasota, Florida 34236

*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

2/28/14  
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

2/28/14  
Date