

P/4000033999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

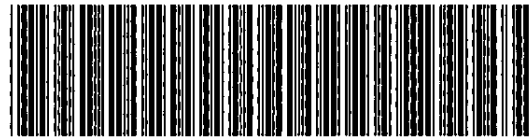
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100258826211

04/14/14--01058--005 **87.50

FILED

14 APR 14 PM 3:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

h 04/16/14

COVER LETTER

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

SUBJECT: One Call Handyman 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: Terrance Dericho Sr.

Name (Printed or typed)

5624 Indialantic Dr.

Address

Orlando, Fl. 32808

City, State & Zip

(321)202-4663

Daytime Telephone number

Tdericho@yahoo.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: One Call Handyman Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

Terrance Dericho Sr.

5624 Indialantic Dr.

Orlando, Fl. 32808

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide professional and reliable services for each and every job encountered.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

(President)

Name and Title: Terrance Dericho Sr.

Name and Title:

Address 5624 Indialantic Dr.

Address:

Orlando, FL 32808

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

FILED
14 APR 14 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: Terrance Dericho Terrance Dericho
Address: 5624 Indialantic Dr.
Orlando, FL 32808

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Terrance Dericho Terrance Dericho
Address: 5624 Indialantic Dr.
Orlando, FL 32808

FILED
14 APR 14 PM 3:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Terrance Dericho April 4, 2014
Required Signature/Registered Agent 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.

Terrance Dericho April 4, 2014
Required Signature/Incorporator Date