

P140000041206

(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



300259946483

05/08/14--01024--004 **78.75

FILED
14 MAY -8 PM 4:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MAY - 9 2014

J. BRYAN

COVER LETTER

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

FILED
14 MAY - 8 PM 14:01
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

SUBJECT: J H Defranco 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: James Defranco

Name (Printed or typed)

6675 Severndale St

Address

cocoa FL 32927

City, State & Zip

321-208-1740

Daytime Telephone number

acrunit30@aol.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: J H Defranco Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

6675 Severndale St

Cocoa FL 32927

Mailing address, if different is _____

FILED
14 MAY -8 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any lawful business

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: James Defranco President

Name and Title: _____

Address 6675 Severndale St

Address: _____

Cocoa FL 32927

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(conti.)

FILED
14 MAY - 8 PM 4:01
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: James Defranco

Address: 6675 Severndale St

Cocoa FL 32927

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: James Defranco

Address: 6675 Severndale St

Cocoa FL 32927

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

James Defranco

Required Signature/Registered Agent

5/6/14
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.

James Defranco

Required Signature/Incorporator

5/6/14
Date