

P15000003960

(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:

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 JAN 13 PM 4:07

APPROVED  
AND  
FILED

**COVER LETTER**

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

**SUBJECT: Chase Repair Services, 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: Allen Colon**

Name (Printed or typed)

**217 Kays Landing Dr**

Address

**Sanford, FL 32771**

City, State & Zip

**321-460-0355**

Daytime Telephone number

**aileencolon11@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)

APPROVED  
AND  
FILED

**ARTICLE I NAME**

The name of the corporation shall be: Chase Repair Services, Inc.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address: if different

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

217 Kays Landing Dr

Sanford, FL 32771

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: \_\_\_\_\_

The purpose of the corporation is to conduct any lawful business activities.

**ARTICLE IV SHARES** 100

The number of shares of stock is: \_\_\_\_\_

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

Name and Title: Allen Colon - President

Name and Title: Jesus Chevere - Vice President

Address: 217 Kays Landing Dr  
Sanford, FL 32771

Address: 6805 Palm River Rd  
Tampa, FL 33619

Name and Title: Christian Chevere - Secretary

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

Address: 6805 Palm River Rd  
Tampa, FL 33619

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

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

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

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

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

(cont.)

APPROVED  
AND  
FILED

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE VI REGISTERED AGENT**

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

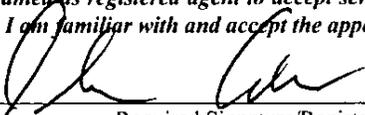
Name: Allen Colon  
 Address: 217 Kays Landing Dr  
Sanford, FL 32771

**ARTICLE VII INCORPORATOR**

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

Name: Allen Colon  
 Address: 217 Kays Landing Dr  
Sanford, FL 32771

*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*

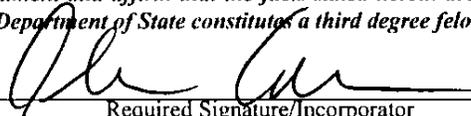


Required Signature/Registered Agent

01/07/14

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

01/07/14

Date