

P1500001053A

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

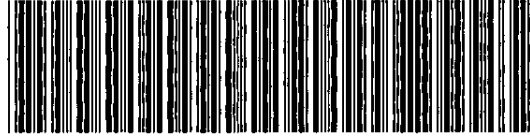
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



800268542598

01/26/15--01006--011 \*\*78.75

FILED  
15 JAN 26 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

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

SUBJECT: **APCON GROUP, 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: **Pierre R. Apollon**

Name (Printed or typed)

**10711 SW 61 Avenue**

Address

**Miami, FL 33156**

City, State & Zip

**305-609-4872**

Daytime Telephone number

**pierre.apollon@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)

**ARTICLE I NAME**

The name of the corporation shall be:

**APCON GROUP, INC.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

**1400 NE Miami Gardens Dr.**

**#103**

**Miami, FL 33179**

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

**Professional Real Estate Management**

**and Engineering Services.**

**ARTICLE IV SHARES**

The number of shares of stock is:

**10000**

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

Name and Title: **Pierre R. Apollon, President**

Name and Title:

Address: **10711 SW 61 Avenue**

Address:

**Miami, FL 33156**

Name and Title: **F. Lucie Casthely, Director**

Name and Title:

Address: **10711 SW 61 Avenue**

Address:

**Miami, FL 33156**

Name and Title:

Name and Title:

Address:

Address:

FILED  
15 JAN 26 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

(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: F. Lucie Casthely

Address: 10711 SW 61 ave

Miami, FL 33156

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

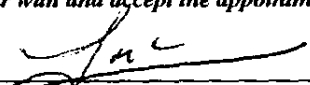
Name: Pierre R. Apollon

Address: 10711 SW 61 Ave.

Miami, FL 33156

FILED  
15 JAN 26 AM 8:30  
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*

  
Required Signature/Registered Agent

1/16/2015

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

1/16/2015

Date