

P15000021699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

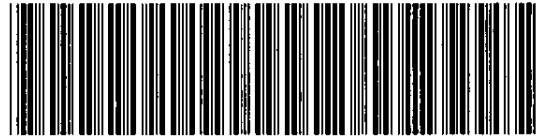
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DIVISION OF CORPORATIONS
15 MAR -6 AM 10:44
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
15 MAR -6 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: C & E Home Improvements 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: Chris F. Martin

Name (Printed or typed)

257 Tall Timbers Rd

Address

Havana, FL 32333

City, State & Zip

850-688-6467

Daytime Telephone number

homeimprovements.cne@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:

C & E Home Improvements Services Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

257 Tall Timbers Rd

Havana, FL 32333

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

New business development of home repairs/remodeling services.

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Chris F. Martin President

Name and Title: _____

Address 257 Tall Timbers Rd

Address: _____

Havana, FL 32333

Name and Title: Ernestine Martin Secretary

Name and Title: _____

Address 257 Tall Timbers Rd

Address: _____

Havana, FL 32333

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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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: Ernestine Martin
Address: 257 Tall Timbers Rd
Havana, FL 32333

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Chris F. Martin
Address: 257 Tall Timbers Rd
Havana, FL 32333

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.

Ernestine Martin

Required Signature/Registered Agent

3/4/2015

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.

Chris F. Martin

Required Signature/Incorporator

3/4/2015

Date

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STATE DEPT OF STATE
TALLAHASSEE, FLORIDA