

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

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Fax Number : (305) 633-9696

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
HDC ELEMENTS, INC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

MAY 20 2015

FILED
15 MAY 19 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
15 MAY 19 PM 4:22
TALLAHASSEE, FLORIDA

94742

41500021034



COVER LETTER

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

SUBJECT: HDC ELEMENTS, 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: SUZETTE EDGHILL

Name (Printed or typed)

1805 S. FEDERAL HWY.

Address

FORT LAUDERDALE, FL 33316

City, State & Zip

954-667-0002

Daytime Telephone number

SUZETTE@HOMEDSIGNCENTERFLORIDA.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

FILED

15 MAY 19 AM 9:45

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: HDC ELEMENTS, INC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

1805 S. FEDERAL HWY

FT LAUDERDALE, FL 33316

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: GENERAL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SUZETTE EDGHILL /PRESIDENT

Address 1805 S. FEDERAL HWY

FT LAUDERDALES, FL 33316

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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: JOHN L. ABITANTE CPA P.A.
 Address: 12401 ORANGE DR. SUITE 100C
 DAVIE, FL 33330

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOHN L. ABITANTE CPA P.A.
 Address: 12401 ORANGE DR. SUITE 100C
 DAVIE, FL 33330

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/19/2015 (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

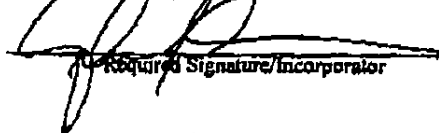
Notes: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

05/12/2015
 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

05/12/2015
 Date

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