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DIVISION OF CORPORATIONS
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MAR 23 2016

T. SCOTT

COVER LETTER

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

SUBJECT: Carudi Enterprises, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: R. Dianne Varick

Name (Printed or typed)

6604 Riverside Bluffs Drive

Address

Riverview, FL 33578

City, State & Zip

917-279-6553

Daytime Telephone number

diannevarick@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: Carudi Enterprises, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

6604 Riverside Bluffs Drive

Riverview, FL 33578

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in the acquisition, rehab (where necessary) and rental

of affordable housing to the general public. Carudi Enterprises, Inc. may also engage in the resale of acquisitions as it

deems advantageous.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: R. Dianne Varick, President

Name and Title: _____

Address 6604 Riverside Bluffs Drive

Address: _____

Riverview, FL 33578

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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DIVISION OF CORPORATIONS
16 MAR 15 PM 1:06

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: R. Dianne Varick
Address: 6604 Riverside Bluffs Drive
Riverview, FL 33578

ARTICLE VII INCORPORATOR

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

Name: R. Dianne Varick
Address: 6604 Riverside Bluffs Drive
Riverview, FL 33578

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: upon filing (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.)

Note: 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

R. Dianne Varick 3/11/16
Required Signature/Registered Agent 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.

R. Dianne Varick 3/11/16
Required Signature/Incorporator Date
R. DIANNE VARICK