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(Business Entity Name)

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SEP 30 2016



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09/28/16--01017--006 \*\*78.75

2016 SEP 28 PM 2:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

**SUBJECT:** Bonaduce Incorporated

(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:** Barbara C Bonaduce

Name (Printed or typed)

105 E Trade Winds Road

Address

Winter Springs, FL 32708

City, State & Zip

321-972-6089

Daytime Telephone number

pgbandsupplies@sbcglobal.net

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: Bonaduce Incorporated

### ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

105 E. Trade Winds Road

PO Box 195884

Winter Springs, FL 32708

Winter Springs, FL 32719

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any business authorized by law in the state of Florida  
and deemed to be profitable to this corporation whether now known or hereafter to be discovered or invented.

### ARTICLE IV SHARES

The number of shares of stock is: 850

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Chris P. Bonaduce, President

Name and Title: Barbara C. Bonaduce, Vice President

Address: 105 E. Trade Winds Road

Address: 105 E. Trade Winds Road

Winter Springs, FL 32708

Winter Springs, FL 32708

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

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

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

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

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

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

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

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

RECORDED  
TALLAHASSEE, FL 32309  
2016 SEP 20 PM 2:01

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: Barbara C. Bonaduce

Address: 105 E. Trade Winds Road

Winter Springs, FL 32708

**ARTICLE VII INCORPORATOR**

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

Name: Barbara C. Bonaduce

Address: 105 E. Trade Winds Road

Winter Springs, FL 32708

1:59 PM SEP 28 2016  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of 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*

Barbara Bonaduce  
Required Signature/Registered Agent

9/22/16  
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.*

Barbara Bonaduce  
Required Signature/Incorporator

9/22/16  
Date