P17000033369

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 APR 10 PM 12:15
SECRETARY OF STATE
TALLAHASSEE FLORIDA

4/12/17

COVER LETTER

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

SUBJECT: Cheryl Henszey 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: Michael Ferraro CPA
Name (Printed or typed)

196 E. Nine Mile Rd------ Suite E
Address

Pensacola FL 32534
City, State & Zip

850-475-4100
Daytime Telephone number

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: Cheryl Henszey Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

4406 WINNERS GAIT CIRCLE

PACE FL 32571

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is

to engage in any business or activity not prohibited by law.

17 APR 10 PM 2:15

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: One

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CHERYL HENSZEY

Address: 4406 WINNERS GAIT CIRCLE
PACE FL 32571

Name and Title: President

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: CHERYL HENSZEY

Address: 4406 WINNERS GAIT CIRCLE

PACE FL 32571

17 APR 10 PM 2:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CHERYL HENSZEY

Address: 4406 WINNERS GAIT CIRCLE

PACE FL 32571

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

Cheryl Hensey
Required Signature Registered Agent

4/5/2017
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.

Cheryl Hensey
Required Signature Incorporator

4/5/2017
Date