

Division of Corporations
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To:

Division of Corporations

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2 1.		
Email	Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION CHANDELLE DIVERSIFIED SERVICES, INC

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

N. SAMS DEC 20 2017

12/19/2017

ARTICLES OF INCORPORATION OF

CHANDELLE DIVERSIFIED SERVICES, INC

The undersigned hereby forms a Corporation under the following charter of Articles of incorporation:

ARTICLE I

The name of this Corporation shall be:

CHANDELLE DIVERSIFIED SERVICES, INC

ARTICLE II

The principal place of business/mailing address is:

12463 GUILFORD WAY WELLINGTON, FL 33414

ARTICLE III

This Corporation is organized for the purpose of transacting any or all-lawful business.

ARTICLE IV

The aggregate number of shares which the corporation has authority to issue is one-thousand (1,000) shares of common stock having a par value of \$1.00 each. The Corporation elects to have preemptive rights for its shareholders.

ARTICLE V

This Corporation shall have one (1) directors initially. The number of directors may be either increased or diminished from time to time by the By-Laws, but shall never be less than one (1). The names and addresses of the initial director(s) of this Corporation are:

CHARLES R. SPERRAZZA 12463 GUILFORD WAY WELLINGTON, FL 33414

ARTICLE VI

The name and address of the initial registered agent of this corporation is:

CHARLES R. SPERRAZZA 12463 GUILFORD WAY WELLINGTON, FL 33414

ARTICLE VII

The name and address of the incorporator (s) of this corporation are:

CHARLES R. SPERRAZZA 12463 GUILFORD WAY WELLINGTON, FL 33414

ARTICLE VIII

The start date of the Incorporation will be:

January 1, 2018

CHARLES R. SPERRAZZA

/PRESIDENT

DATE

17 DEC 19 PM 3: I

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned Corporation, organized under the laws of the state of Florida, submits in the state of Florida.

1. The name of the Corporation is:

CHANDELLE DIVERSIFIED SERVICES, INC

The name and address of the registered agent and office is:

CHARLES R. SPERRAZZA 12463 GUILFORD WAY WELLINGTON, FL 33414

Having been named as registered agent and to accept service of process for the above stated Corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

CHARLES R. SPERRAZZA

/PRESIDENT

DATE

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