P180000	36 591
(Requestor's Name) (Address) (Address)	300312038693
(City/State/Zip/Phone #)	04/20/1801028011 **70.00
(Business Entity Name) (Document Number)	
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Department of State New Filing Section **Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

	Sandra Menard, PA
SUBJECT:	
	(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

S78.75 Filing Fee & Certificate of Status

S78.75 Filing Fee & Certified Copy

\$87.50 Filing Fee. Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED

M .	Sandra Menard		
JIVI:		Name (Printed or typed)	
	4021 SW 5th PL		
		Address	
	Cape Coral, FL 33914		
		City. State & Zip	
	(401) 641-7034		
	· · · · · · · · · · · · · · · · ·	Daytime Telephone number	

sandym811@yahoo.com

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

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

April 18, 2018

Department of State Division of Corporations

Clifton Building 2661 Executive Center Drive Tallahassee, FL 32301

Reference: Sandra Menard, PA Florida Document Number: P16000045273

Dear Department:

It has come to our attention that our corporation Sandra Menard, PA was dissolved administratively.

At this time I would like to release our document number P16000045273 as the authorized president of this corporation

I am also submitting at this time articles that I am asking you to file on my behalf.

Thanking you for your assistance in getting these matters in order.

Sincerely, ardia Meraid

Sandra Menard, President

· · ·	ARTICLES OF INC In compliance with Chapter 607 an)
ARTICLE NAME	Carden Monard DA		
<u>ARTICLE II PRIN</u>			
4021 SW 5th PL Cape Coral, FL. 33914	ļ		
	OSE Real Estate the corporation is organized is:	<u> </u>	
	<u>ES</u> 100 shares at a \$1.00 par value per f stock is:	er share	PR 23 PH 1: 34 MIASSEE, FLLM
	AL OFFICERS AND/OR DIRECTORS Sandra Menard. President	Name and Title:	· · · · · · · · · · · · · · · · · · ·
	4021 SW 5th PL		
Address	Cape Coral, FL. 33914	Address:	
Name and Titl	e:		
Address		Address:	
Name and Titl	e:		
Address		Address:	

.

same and Title:	Name a	and Title:	
Address	Addres	ss:	

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name:	Ronald St. Clair	
Address:	709 Cape Coral Pkwy W	
	Cape coral, FL 33914	

Sandra Menard, President

Cape Coral, FL. 33914

4021 SW 5th PL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Address:

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 days prior or 90 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

Ulic ten als

Required Signature/Registered Agent

Date

APR 23 PH I:

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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.

1exand

Required Signature/Incorporator

4/18/2018

Date