

P20000039446

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

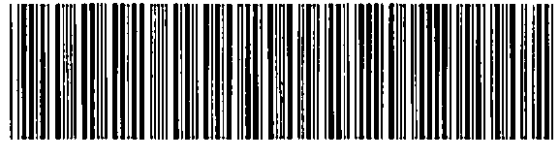
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500344252775

05/22/20--01017--002 **78.75

FILED
2020 MAY 22 PM 12:55
CLERK OF COURT

COVER LETTER

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

SUBJECT: NATHAN G. FONTE 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 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: NATHAN G. FONTE ENTERPRISES, INC.
Name (Printed or typed)

10840 RUTHERFORD CT.
Address

JACKSONVILLE, FL. 32257
City, State & Zip

904-829-4045
Daytime Telephone number

MANDARIN PROFORMA @ HOTMAIL.COM
E-mail address: (to be used for future annual report notification)

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

2020 MAY 22 PM 12:56

FILED

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: NATHAN G. FONTE ENTERPRISES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

10840 RUTHER FORD CT.
JACKSONVILLE, FL 32257

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

ARTICLE IV SHARES

The number of shares of stock is: 1,000 SHS

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NATHAN G. FONTE - DIRECTOR Name and Title: _____

Address 10840 RUTHER FORD CT. Address: _____
JACKSONVILLE, FL 32257

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
2020 MAY 22 PM 12:56
CLERK OF DISTRICT COURT

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: NATHAN G. FONTE
Address: 10840 RUTHERFORD CT.
JACKSONVILLE, FL 32257

ARTICLE VII INCORPORATOR

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

Name: NATHAN G. FONTE
Address: 10840 RUTHERFORD CT.
JACKSONVILLE, FL 32257

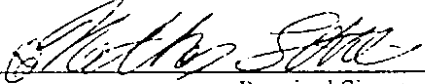
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: MAY 20, 2020 (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




Required Signature/Registered Agent

5/20/2020

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.



Required Signature/Incorporator

5/20/2020

Date