

11/9/21, 2:28 PM

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Florida Department of StateDivision of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : WILSON TAX & ACCOUNTING INC.
Account Number : I20150000107
Phone : (941)625-1925
Fax Number : (941)625-1526

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: kencooks@comcast.net

FLORIDA PROFIT/NON PROFIT CORPORATION

Cook's Endeavor Inc

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: COOK'S ENDEAVOR INC**ARTICLE II PRINCIPAL OFFICE**Principal street address

Mailing address, if different is:

1968 ALLEN ST1968 ALLEN STENGLEWOOD, FL 34223ENGLEWOOD, FL 34223**ARTICLE III PURPOSE**The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS**ARTICLE IV SHARES**The number of shares of stock is: 100**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: PAIGE COOKName and Title: KENNETH COOKAddress PRESIDENTAddress: DIRECTOR1968 ALLEN ST1968 ALLEN STENGLEWOOD, FL 34223ENGLEWOOD, FL 34223Name and Title: ADEL COOK

Name and Title: _____

Address DIRECTOR

Address: _____

1968 ALLEN STENGLEWOOD, FL 34223

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

2021/11/09 13:44 CST

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: PAIGE COOK

Address: 1968 ALLEN ST

ENGLEWOOD, FL 34223

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: PAIGE COOK

Address: 1968 ALLEN ST

ENGLEWOOD, FL 34223

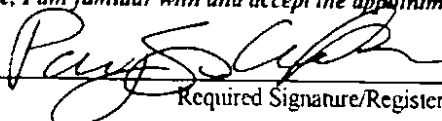
ARTICLE VIII EFFECTIVE DATE:

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.

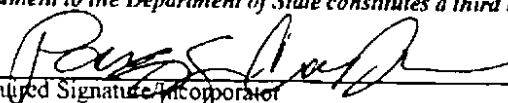
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity


Required Signature/Registered Agent

NOVEMBER 8, 21

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

NOVEMBER 8, 21

Date

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