

P95000046240

TRANSMITTAL LETTER

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

3000001509553  
-06/09/95--01030--004  
\*\*\*\*\*78.75 \*\*\*\*\*78.75

SUBJECT: SOLID ROCK CAFE'  
(Proposed corporate name - must include suffix)

Enclosed is an original and one (1) copy of the articles of incorporation and a check for :

☐ \$70.00  
Filing Fee

☒ \$78.75  
Filing Fee  
& Certificate

☐ \$122.50  
Filing Fee  
& Certified Copy

☐ \$131.25  
Filing Fee,  
Certified Copy  
& Certificate

SECRETARIAT OF STATE  
TALLAHASSEE, FLORIDA

95 JUN -9 PM 5:26

FILED

FROM: MARK CHARBONEAU  
Name (printed or typed)

11720 HEATHER GROVE  
Address

JACKSONVILLE FL. 32223  
City, State & Zip

904 262-0178  
904 269-7244  
Daytime Telephone number

BE 6/14

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

## ARTICLES OF INCORPORATION

FILED  
95 JUN -9 PM 5:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.*

### ARTICLE I NAME

The name of the corporation shall be: **SOLID ROCK CAFE' INC.**

### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

**C/O FOR HEAVEN'S SAKE  
A-1 ORANGE PARK MALL 1910 WELLS RD.  
ORANGE PARK FL 32073**

### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

**10,000**

### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

**MARK CHARBONEAU  
11720 HEATHER GROVE LANE  
JACKSONVILLE FL. 32223**

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MARK CHARBONNEAU  
11720 HEATHER GROVE LANE  
JACKSONVILLE FL. 32223

DEBORAH  
CHARBONNEAU  
SAME/WIFE

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

6 day of JUNE, 1995.

Mark Charbonneau Pres / Treasurer  
Signature  
Deborah Charbonneau V-Pres / Sec.  
Signature

\_\_\_\_\_  
Signature

Articles of Incorporation  
Filing Fee - \$35

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the corporation is: SOLID ROCK CAFE' INC.

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

MARK CHARBONEAU  
(Name)  
C/O "FOR HEAVEN'S SAKE"  
A-1 ORANGE PARK MALL 1910 WOOD  
(P.O. Box not acceptable)  
ORANGE PARK FL. 32073  
(City/State/Zip)

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95 JUN -9 PM 5:55  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*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.*

Mark Charboneau  
(Signature)

6-6-1995  
(Date)

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
FOR  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

96 SEP 19 AM 10:11

mtw 10/1

DOCUMENT # **P95000046240**

1 Corporation Name

**SOLID ROCK CAFE' INC.**

Principal Place of Business

% FOR HEAVEN'S SAKE, A-1 ORANGE PARK MALL  
1910 WELLS DR  
ORANGE PARK FL 32073

Mailing Address

% FOR HEAVEN'S SAKE, A-1 ORANGE PARK MALL  
1910 WELLS DR  
ORANGE PARK FL 32073



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2 New Principal Office Address, if Applicable		3 New Mailing Office Address, if Applicable		4 Date Incorporated or Qualified To Do Business in Florida <b>06/09/1995</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5 FEI Number <b>59-336-5165</b> Applied For <input type="checkbox"/> Not Applicable <input checked="" type="checkbox"/>	
City & State		City & State		6 CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$75 Additional fee required for a Certificate of Status	
Zip	Country	Zip	Country		

7 Names and Street Addresses of Each Officer and Director (Florida nonprofit corporations must list at least 3 directors)			
1 Titles	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PRES	MARK CHARBONEAU	11720 HEATHER GROVE LN	JACKSONVILLE FL 32223
V. PRES	DEBORAH CHARBONEAU	"	"

8 Name and Address of Current Registered Agent	9 Name and Address of New Registered Agent
CHARBONEAU, MARK 11720 HEATHER GROVE LANE JACKSONVILLE FL 32223	Name
	Street Address (P.O. Box Number is Not Acceptable)
	Suite, Apt. #, Etc.
	City State Zip Code FL

10 I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent Mark Charboneau Pres. Date Sept. 18, 1996

REGISTERED AGENT MUST SIGN

11 Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statute? Yes ☐ No ☒ (See other side for information on intangible tax.)

12 I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Mark Charboneau 1-904-  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Sept. 18, 1996 262-0178  
Date Daytime Phone #