

P1400072033

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

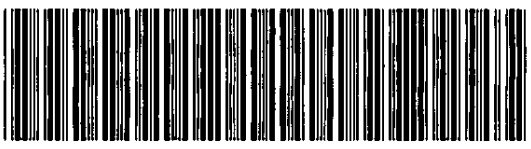
PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:



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08/04/14--01013--005 **78.75

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Office Use Only

W1400048095
B 8/28/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 6, 2014

CHARLIE LOVETT
801 N.E. 33RD STREET, APT A 216
POMPANO BEACH, FL 33064

SUBJECT: CAN-DO ENTERPRISES, INC.
Ref. Number: W14000048095

We have received your document for CAN-DO ENTERPRISES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 614A00016874

Original

COVER LETTER

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

SUBJECT: CAN-DO ENTERPRISE FLL, INC
CAN-DO ENTERPRISE^{FLL} 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: Charlie Lovett
Name (Printed or typed)

801 N.E. 33rd Str. Apt A 216
Address

Pompano Bch. FL. 33064
City, State & Zip

954 657 1815
Daytime Telephone number

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

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

ARTICLES OF INCORPORATION

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

FLL

ARTICLE I NAME

The name of the corporation shall be: CAN-DO Enterprise, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2151 NW 10th Ct
Pompano Bch. FL 33069

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TO Provide Equipment
FOR households, Businesses, Etc. FOR Rentals
AND Leasing such as outdoor Tents, Tables,
Chairs, generators, etc.

ARTICLE IV SHARES

The number of shares of stock is: 3

REC'D
DIVISION OF CORPORATIONS
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ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Charlie Lovett / Pres. Name and Title: _____

Address: 801 NE 33rd St. Address: _____
Apt. A 216
Pompano B. FL 33064

Name and Title: Mozell Shepard / Treas. Name and Title: _____

Address: 2151 NW 10th Ct. Address: _____
Pompano Bch FL 33069

Name and Title: AVIS Crump / Sec. Name and Title: _____

Address: 2160 NW 4th Street Address: _____
Pompano B. FL 33069

Name and Title: _____ Name and Title: _____
 Address _____ Address: _____

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 DIVISION OF CORPORATIONS
 STATE OF FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Charlie Lovett
 Address: 801 NE. 33rd st
Pompano Bch. Fl. 33064

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Charlie Lovett
 Address: 801 NE 33rd st.
Pompano Bch. Fl. 33064

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

Charlie Lovett
 Required Signature/Registered Agent

July 31, 2014
 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.

Charlie Lovett
 Required Signature/Incorporator

July 31, 2014
 Date