

P/5000049/38

(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



000273288220

06/03/15--01008--009 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUN -3 PM 12:39

APPROVAL
AND
FILED

V/H

COVER LETTER

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

SUBJECT: Dodge & Associates USA, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Michael Lavezzorio

Name (Printed or typed)

7443 Roebelenii Court

Address

Sarasota, Florida 34241

City, State & Zip

847-910-3440

Daytime Telephone number

Mdlldodge@aol.com

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

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

APPROVED
AND
FILED

ARTICLES OF INCORPORATION

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

15 JUN -3 PM 12:40

ARTICLE I NAME

The name of the corporation shall be: Dodge & Associates USA, Inc.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7443 Roebelenii Court

Sarasota, Florida 34241

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Manufacturers Representative to the Industrial Printing Industry.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Michael Lavezzorio, President

Name and Title:

Address

7443 Roebelenii Court

Address:

Sarasota, Florida 34241

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

APPROVED
AND
FILED

Name and Title: _____ Name and Title: 15 JUN -3 PM 12:40
Address: _____ Address: SECRETARY OF STATE

_____ TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Michael Lavezzorio
Address: 7443 Roebelenii Court
Sarasota, Florida 34241

ARTICLE VII INCORPORATOR

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

Name: Michael Lavezzorio
Address: 7443 Roebelenii Court
Sarasota, Florida 34241

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 business days prior or 90 business 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

Michael Lavezzorio
Required Signature/Registered Agent

5-29-15
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.

Michael Lavezzorio
Required Signature/Incorporator

5-29-15
Date