

N9900003916

TRANSMITTAL LETTER

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

000002914230--4

-06/24/99--01061--007

*****78.75 *****78.75

SUBJECT:

SOLVI, Inc.

(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 of
Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

Solvi, Inc.

Name (Printed or typed)

4509 N. Blvd. St

Address

Tampa, FL

City, State & Zip

(813) 238-2107

Daytime Telephone number

99 JUN 24 AM 10:50
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

6-25
25

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Not for Profit Corporation Act, hereby adopt(s) the following Articles of Incorporation:

ARTICLE I NAME

The name of the corporation shall be:

Solvi, Inc.

ARTICLE II PRINCIPAL OFFICE

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

4509 N. Blvd. St.
Tampa, FL 33603

ARTICLE III PURPOSE(S)

The specific purpose(s) for which the corporation is organized is(are):

To promote family values, encourage students to study and arts through a bilingual theater.

ARTICLE IV MANNER OF ELECTION OF DIRECTORS

The manner in which the directors are elected or appointed is:

Edwin Salano - President
Ligia Vilella - Vice-President
Rafael Vilella - Secretary
Ligia Hecht - Treasurer

ARTICLE V INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

Edwin Salano
4509 N. Blvd. St.
Tampa, FL 33603

ARTICLE VI INCORPORATOR

The name and address of the Incorporator to these Articles of Incorporation are:

Solvi, Inc.
4509 N. Blvd. St.
Tampa, FL 33603

Ed. Sal

Signature/Incorporator

5-25-99

Date

(An additional article must be added if an effective date is requested.)

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.

Ed. Sal

Signature/Registered Agent

5-25-99

Date

FILED
99 JUN 24 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA