

N09000009594

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

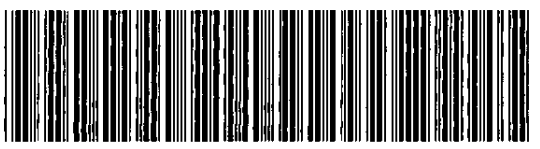
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700157967027

10/02/09--01009--014 **87.50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 OCT -2 AM 11:08

APPROVED
AND
FILED

V/H

COVER LETTER

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

SUBJECT: Polonia Family Fund Corp.
(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: Marcelino Reyes
Name (Printed or typed)

7579 ABONADO RD, #
Address

TAMPA, FL 33615
City, State & Zip

(813) 431-0353
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 617, F.S., (Not for Profit)

APPROVED
AND
FILED

09 OCT -2 AM 11:08

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Polonia Family Fund Corp

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

7579 Abonado Rd, Tampa, FL 33615

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Funeral Fund

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

Vote

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

MARCELINO REYES: 7579 ABONADO RD, TAMPA, FL 33615 (DIRECTOR)
VICTOR REYES: 1105 MIAMI WOODS CT, ORLANDO, FL 32824 (COORDINATOR)
EDDY G. REYES: 14524 O'CONNELL RD, DADE CITY, FL 33525 (COORDINATOR)

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

MARCELINO REYES: 7579 ABONADO RD, TAMPA, FL 33615

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JOSHUA REYES: P.O. BOX 65642, ORANGE PARK, FL 32065

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.

Signature/Registered Agent

Date

Signature/Incorporator

Date