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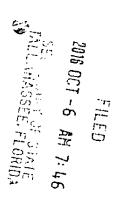
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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V HERRING OCT 11 2016

COVER LETTER

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

JBJECT:			
	(PROPOSEĎ CORP	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
closed is an original a	and one (1) copy of the Ar	ticles 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 CO	PY REQUIRED
FROM:	Judith Estrada	me (Printed or typed)	_
	11549 Captiva Kay Dr.		
	Riverview, Fl 33569	Address	

UNITED PACKAGING ASSOCIATES

813-732-8247

info@unitedpackagingassociates.com

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

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

City, State & Zip

Daytime Telephone number



September 27, 2016

JUDITH ESTRADA 11549 CAPTIVA KAY DR. RIVERVIEW, FL 33569

SUBJECT: UNITED PACKAGING ASSOCIATES

Ref. Number: W16000066483

We have received your document for UNITED PACKAGING ASSOCIATES 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 must contain a word that will clearly indicate that it is a corporation. This word may be: CORPORATION, CORP., INCORPORATED, or INC. Sections 617.0401(1)(a) and 617.1506(1), Florida Statutes, prohibits the use of the word COMPANY or CO. in the name of a non-profit corporation.

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.

Valerie Herring Regulatory Specialist II New Filing Section

Letter Number: 216A00020740

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

The name o	I NAME f the corporation shall be:	PACKAGING ASSOCIA	TES, Zvc.	FILED.
ARTICLE .				2016 OCT -6 AK 7: 46
30	Principal <u>street</u> address: 30 N Rocky Point Dr. W		Mailing address, if	different is: JALLAMASSEE, FLORING
Su	ite 150			19
Ta	mpa, Fl 33607			
The purpose	THE PURPOSE of for which the corporation is organized ented approaches on emerging issues for the corporation is organized enter approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches on emerging issues for the corporation is organized entered approaches entered enter	1 1S:		s about the latest trends and
6	· · · · · · · · · · · · · · · · · · ·	e manner in which the dire	ctors are elected and appoi	Elected by majority Vote
article	INITIAL OFFICERS AND/OR D	IRECTORS		inted: Elected by majority Vol e
article	INITIAL OFFICERS AND/OR D	IRECTORS	Ismael Santiago, Chair	Elected by majority VolC
ARTICLE	INITIAL OFFICERS AND/OR D Title: 13881 Lindo Street	IRECTORS	Ismael Santiago, Chair 11549 Captiva Kay Dr	inted: Elected by majority Vote
ARTICLE	INITIAL OFFICERS AND/OR D	IRECTORS Name and Title	Ismael Santiago, Chair	Elected by majority Vole
ARTICLE Name and T Address	INITIAL OFFICERS AND/OR D Title: 13881 Lindo Street Venice, FL 34293	Name and Title Address:	Ismael Santiago, Chair 11549 Captiva Kay Dr	inted:
ARTICLE Name and T Address	INITIAL OFFICERS AND/OR D Title: 13881 Lindo Street Venice, FL 34293	Name and Title Address: Name and Title	Ismael Santiago, Chair 11549 Captiva Kay Dr Riverview, FL 33569	inted:
ARTICLE	itle: Judith Estrada, VP Finance	Name and Title Address:	Ismael Santiago, Chair 11549 Captiva Kay Dr Riverview, FL 33569 Joe Davila, VP Members	inted:
ARTICLE Name and T Address	itle: Janice Loppe, President 13881 Lindo Street Venice, FL 34293 itle: Judith Estrada, VP Finance 11549 Captiva Kay Dr Riverview, FL 33569	Name and Title Address: Name and Title Address: Address: Address:	Ismael Santiago, Chair 11549 Captiva Kay Dr Riverview, FL 33569 Joe Davila, VP Members 2981 Corewood Pl	hip
ARTICLE Name and T Address Name and T Address	itle: Janice Loppe, President 13881 Lindo Street Venice, FL 34293 itle: Judith Estrada, VP Finance 11549 Captiva Kay Dr Riverview, FL 33569	Name and Title Address: Name and Title Address: Name and Title Name and Title	Ismael Santiago, Chair 11549 Captiva Kay Dr Riverview, FL 33569 Joe Davila, VP Members 2981 Corewood Pl Clearwater, FL 33761	hip

Name and Titl	Suzanne M. Daigle	Name and Title:	
Address	7159 Victoria Circle	Address:	
	University Pk, FL		FILED
	34201	_	2016 OCT -6 AM 7: 46
			TALLAHASSEE, FLORIDA
Name and Titl	e:	Name and Title:	ANASSEE, FLORIDA
Address		Address:	
ARTICLE VI	REGISTERED AGENT I Florida street address (P.O. Box NOT ac	centable) of the registere	d agent is:
Name:	Janice Loppe		
	13881 Lido St.		
Address:	Venice, FL 34293		
	I INCORPORATOR		
	address of the Incorporator is: Judith Estrada		
Name:	11549 Captiva Kay	Dr	
Address:	Riverview, FL 3356		
	Kiverview, FL 5550		
	II EFFECTIVE DATE: c, if other than the date of filing:		. (OPTIONAL)
(If an effectivafter the filin	ve date is listed, the date must be specific	and cannot be more th	nan five business days prior or 90 business days
	date inserted in this block does not meet the ffective date on the Department of State's r		ng requirements, this date will not be listed as the
Having been certificate, I a	named as registered agent to accept servi im familiar with and accept the appointmen	ice of process for the ab nt as registered agent and	oove stated corporation at the place designated in to d agree to act in this capacity
	- Janua Loppe Required Signature of Registe	rod Agent	9/21/2016 Date
I cultivit thin	document and affirm that the facts stated h	rarain ara trua. Lam awa	are that any false information submitted in a docum
to the Depart	ment of State constitutes a third heafee felo	ony as provided for in s.8.	17.155, F.S.
	ment of State constitutes a third they ee felo	l_	9/21/2016
_	Required Signature of In	corporator	7 Date