

P020000116422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

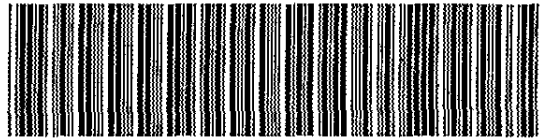
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/28/02--01123--013 **78.75

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02 OCT 28 AM 10:10

10/28/02 10:10 AM

TRANSMITTAL LETTER

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

SUBJECT: VeePay, 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: Yelda Wright
Name (Printed or typed)

4130 N W 30 Terrace #4
Address

Lauderdale Lakes, FL 33309
City, State & Zip

954-735-8706
Daytime Telephone number

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

ARTICLES OF INCORPORATION

Article I VeePay, Incorporated

Article II 4130 NW 30 Terrace, #4
Lauderdale Lakes, Florida 33309

Article III This entity is being formed to record keep and process payroll and books
For small businesses. Businesses that have 1-5 employees.

Article IV There is 100 of shares.

Article V The Initial Officers are as follows:
Velda Wright-Owner/President
Clifford Wright-Owner/ V-President

Article VI Registered Agent:
Velda Wright, President
4130 NW 30 Terrace #4
Lauderdale Lakes, FL 33309

Article VII Incorporator
Velda Wright
4130 NW 30 Terrace #4
Lauderdale Lakes, FL 33309

*Having been named a 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.*

Velda Wright
Signature/Registered Agent

Velda Wright
Signature/Incorporator

10/24/02
Date

10/24/02
Date

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02 OCT 28 AM 10:10
TALLAHASSEE, FLORIDA