

PO3000044469

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

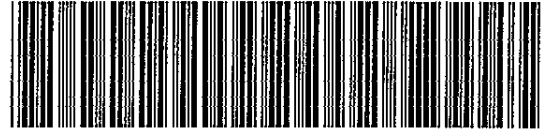
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/18/03--01076--011 **78.75

FILED

03 APR 18 AM 9:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: _____

IONYA ROBINSON 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: _____

IONYA ROBINSON INC

Name (Printed or typed)

3377 International Village Drive W

Address

Jacksonville FL 32277

City, State & Zip

(904) 294-1448

Daytime Telephone number

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

ARTICLES OF INCORPORATION

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

ARTICLE I NAME

The name of the corporation shall be:

IONYA ROBINSON INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

3377 International Village Drive W
Jacksonville FL 32277

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

NEW Business

ARTICLE IV SHARES

The number of shares of stock is: 100 SPS

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

IONYA ROBINSON - President
3377 International Village Drive W
Jacksonville FL 32277

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

IONYA ROBINSON
3377 International Village Drive W
Jacksonville FL 32277

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

IONYA ROBINSON
3377 International Village Drive W
Jacksonville FL 32277

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

4.14.03



Signature/Incorporator

Date

4.14.03

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA