

PO300008772

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

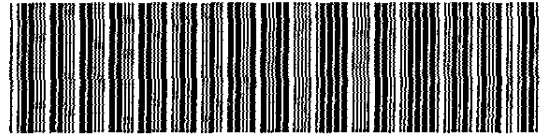
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TS
8/11/03

TRANSMITTAL LETTER

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

SUBJECT: Merchant services of South Florida 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: Philip Gutman
Name (Printed or typed)

5600 Collins Ave # 4D
Address

Miami Beach, FL 33140
City, State & Zip

305 984 4044
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:

Merchant services of South FLORIDA,
INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5600 Collins Ave Ste 4D
Miami Beach FL 33140

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Credit card processing

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Philip Gutman, President, 5600 Collins Ave #41
Miami Beach, FL, 331
Joseph Dicostanzo, Vice President, 32 Borman Ave
Staten Island NY

ARTICLE VI REGISTERED AGENT

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

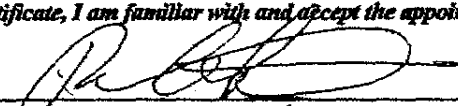
Philip Gutman, 5600 Collins Ave #4D, Miami Beach FL
33140

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Philip Gutman, 5600 Collins Ave #4D
Miami Beach FL 33140

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

8/1/03

Date



Signature/Incorporator

8/1/03

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA