

PO3000117362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

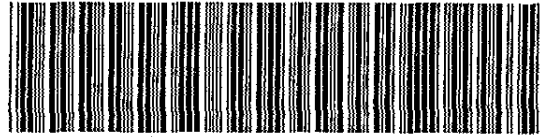
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400023741024

10/17/03--01079--016 **87.50

FILED

03 OCT 17 PM 2:45

CLERK OF STATE
TALLAHASSEE, FLORIDA

TS
10/21/03

TRANSMITTAL LETTER

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

SUBJECT: Virtual Outlets, 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: Robert Caicedo
Name (Printed or typed)

963 NW 89th AVE
Address

Plantation, FL 33324
City, State & Zip

934-471-0722
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:

VIRTUAL OUTLETS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

963 NW 89TH AVE, PLANTATION, FLORIDA 33324

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

FOR PROFIT

ARTICLE IV SHARES

The number of shares of stock is:

1,000 SHARES COMMON - NO PARTICULAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

ROBERT CAICEDO
963 NW 89TH AVE PLANTATION, FL 33324

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT CAICEDO
963 NW 89TH AVE, PLANTATION, FL 33324

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

10-15-03

Date



Signature/Incorporator

10-15-03

Date

03 OCT 17 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED