P04000007601

(Requestor's Name)				
(Ad	dress)			
(Ad	dress)			
(Cit	VState/Zin/Dhon	e #N		
(City/State/Zip/Phone #)				
PICK-UP	MAIT	MAIL		
- Bu	siness Entity Nar	me)		
(5.1	omood amary (tax	no,		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



400025880734

01/02/04--01030--008 **70.00

04 JAN -2 PH 12: 23

SECRETARY OF STATE DIVISION OF SORPORATIONS

15/1/2

TRANSMITTAL LETTER

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

SUBJECT: Ivon	eco Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDPISUTELX)
	•		
Enclosed are an orig	ginal and one (1) copy of the arti	icles of incorporation and	a check for:
- ☑ \$70.00	□ \$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
		di ottanio ospi	& Certificate of
			Status
	ADDITIONAL COPY REQUIRED		
FROM: N	one Wagner		
	Name	(Printed or typed)	
	407 Farrat Lakes Divid		
	127 Forest Lakes Blvd		
		Address	
	Oldsmar, FL 34677		
	City,	State & Zip	
	813-855-0956		
	Daytime 7	elenhone number	<u>* *</u>

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:

Ivoneco Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is: 127 Forest Lakes Blvd #8
Oldsmar, FL 34677

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

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): Ivone Wagner - President 127 Forest Lakes Bld #8 Oldsmar, FL 34677

ARTICLE VI REGISTERED AGENT

The <u>name and Florida street address</u> of the registered agent is: Ivone Wagner 127 Forest Lakes Bld #8 Oldsmar, FL 34677

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Ivone Wagner 127 Forest Lakes Bld #8 Oldsmar, FL 34677

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/Rebistered Agent

Stemature/Incorporator

Date 21-03

Date

DIVISION OF 50 PH 12: 23