

P04000055961

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Ideal Total Solutions, 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: Deborah R. Rosado

Name (Printed or typed)

10040 Sheridan Street, Unit 306

Address

Pembroke Pines, FL 33024

City, State & Zip

(954) 432-5061

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:

Ideal Total Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

10040 Sheridan Street, Unit 308
Pembroke Pines, FL 33024

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Consulting

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):

Deborah R. Rosado
10040 Sheridan Street, Unit 308
Pembroke Pines, FL 33024

ARTICLE VI REGISTERED AGENT

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

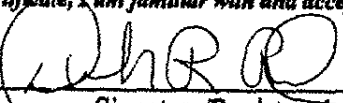
Deborah R. Rosado
10040 Sheridan Street, Unit 308
Pembroke Pines, FL 33024

ARTICLE VII INCORPORATOR

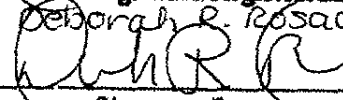
The name and address of the Incorporator is:

Deborah R. Rosado
10040 Sheridan Street, Unit 308
Pembroke Pines, FL 33024

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



Signature/Incorporator
Deborah R. Rosado.

03/26/04

Date

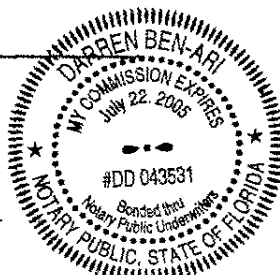
03/26/04

Date

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 26 day of March, 2004, by Deborah Rosado

Signature of Notary public-State of Florida



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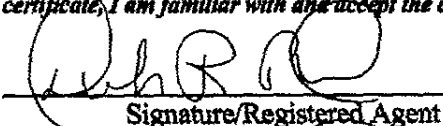
Deborah R. Rosado
10040 Sheridan Street, Unit 306
Pembroke Pines, FL 33024

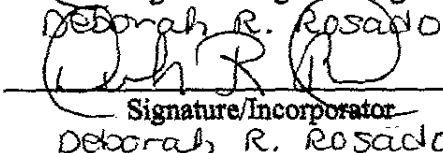
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Pembroke Pines, FL 33024

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Signature/Registered Agent


Signature/Incorporator
Deborah R. Rosado

03/26/04

Date

03/26/04

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STATE OF FLORIDA
COUNTY OF BROWARD

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Signature of Notary Public, State of Florida

