

PO5000045413

(Requestor's Name)

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(City/State/Zip/Phone #)

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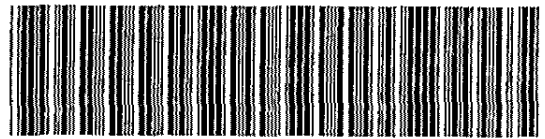
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
05 MAR 28 AM 9:04

un 3/28



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

RECEIVED

05 MAR 28 AM 8:17

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

March 16, 2005

LAUREN FILLINGAME
11863 WIMBLEDON CIRCLE #434
WELLINGTON, FL 33414

SUBJECT: MCL INCORPORATED
Ref. Number: W05000013684

We have received your document for MCL INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with a notarized affidavit stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist
New Filings Section

Letter Number: 605A00018086

TRANSMITTAL LETTER

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

SUBJECT: MCL Incorporated
(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: Lauren Fillingame
Name (Printed or typed)

11863 Wimbledon Cir #434
Address

Wellington, FL 33414
City, State & Zip

561-790-5433
Daytime Telephone number

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

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05 MAR 28 AM 9:05

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: ~~maxi incorporated~~
Virtual Processing, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 11863 Wimbledon Circle #435
Wellington, FL 33414

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):

President: Michael Hiatt
7114 Tarragon Ct.
Indianapolis, IN 46237

Treasurer: Lauren Fillingame
11863 Wimbledon Cir
#434
Wellington, FL 33414

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Lauren Fillingame
11863 Wimbledon Cir #434
Wellington, FL 33414

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lauren Fillingame
11863 Wimbledon Cir #434
Wellington, FL 33414

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

3-4-05

Date



Signature/Incorporator

3-4-05

Date