

PO6000017491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

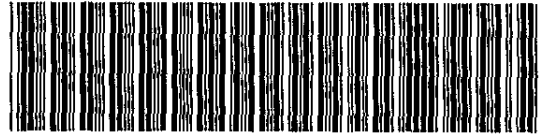
(Document Number)

Certified Copies _____

Certificates of Status _____

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06 FEB -3 PM 1:06
TALLAHASSEE, FLORIDA

2006 FEB 07 03:00 PM

COVER LETTER

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

SUBJECT: United Restoration Group 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: Oscar E. Vera
Name (Printed or typed)

2489 NW 191 ave.
Address

Pembroke Pines, Florida 33029
City, State & Zip

(954) 665-6904
Daytime Telephone number

SECRET
TALLAHASSEE, FLORIDA

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FILED

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:

United Restoration Group Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2489 NW 191 ave. Pembroke Pines Florida 33029

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Window Tinting

ARTICLE IV SHARES

The number of shares of stock is:

One hundred (100)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Oscar E. Vera 2489 NW 191 ave. Pembroke Pines Florida 33029
President

ARTICLE VI REGISTERED AGENT

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

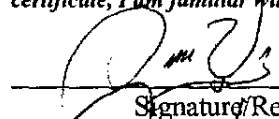
Oscar Vera 2489 NW 191 ave Pembroke Pines Fl. 33029

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Oscar E. Vera 2489 NW 191 ave Pembroke Pines Florida 33029

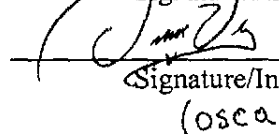
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

1-26-06

Date



Signature/Incorporator
(Oscar E. Vera)

1-26-06

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA