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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

6-13-06  
49C

## COVER LETTER

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

**SUBJECT: MICHAEL UNIVERSAL ENTERPRISES, 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      ☒ \$78.75  
Filing Fee      Filing Fee  
                         & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
<b>ADDITIONAL COPY REQUIRED</b>	

FROM: ASNEL PERDOMO  
Name (Printed or typed)

2238 EXCALIBUR DR  
Address

ORLANDO FL 32822  
City, State & Zip

(32) 299-2129  
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:

MICHAEL UNIVERSAL ENTERPRISES, INC

## **ARTICLE II      PRINCIPAL OFFICE**

The principal place of business/mailing address is:

2238 EXCALIBUR DR  
ORLANDO, FL 32822

## **ARTICLE III      PURPOSE**

The purpose for which the corporation is organized is:

This corporation may engage in or transact any and all lawful activities of business permitted under the laws of the United State of Florida. The State of Florida, or any state, county, territory or nation.

## **ARTICLE IV      SHARES**

The number of shares of stock is:

5.000

## **ARTICLE V      INITIAL OFFICERS AND/OR DIRECTORS**

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

Asnel Perdomo.....President  
2238 Excalibur Dr  
Orlando, FI 32822

## **ARTICLE VI      REGISTERED AGENT**

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

Asnel Perdomo  
2238 Excalibur Dr  
Orlando, FI 32822

## **ARTICLE VII      INCORPORATOR**

The name and address of the Incorporator is:

Asnel Perdomo  
2238 Excalibur Dr.  
Orlando FI 32822

\*\*\*\*\*

*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

06/08/2006

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Signature/Incorporator

06/08/2006

\_\_\_\_\_  
Date

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