

PO6000107641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Migdaljac Losada GAVE

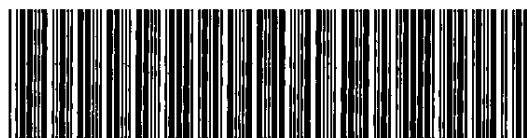
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DATE 8/17

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 AUG 17 PM 3:03

B. McKnight AUG 17 2006

COVER LETTER

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

SUBJECT: **AUDIO PLUSS, 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: **Migdalia C Losada**

Name (Printed or typed)

5371 Andris Ct

Address

North Port, Florida, 34288

City, State & Zip

941-504-0569

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:

AUDIO PLUSS,INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

19800 VETERANS Blvd, Unit-D-9 Port Charlotte,FL,33954

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Staring and automovile accesories and repairs

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):

Migdalia C Losada 5371 Andris Ct ,North Port FL,34288-President-Treasury.

Jose L Losada 5371 Andris Ct,Nort Port,FL,34288-Vice-President.

Ivan J Losada 5371 Andris Ct,Nort Port,FL,34288-Secretary

ARTICLE VI REGISTERED AGENT

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

MigdaliaC Losada.
5371 andris ct
North Port,FL34288

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MigdaliaC Losada.
5371 andris ct
North Port,FL34288

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

MigdaliaC Losada

Signature/Registered Agent

MigdaliaC Losada

Signature/Incorporator

8/14/04

Date

8/14/06

Date

06 AUG 17 PM 3:03

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS