P07000028940

(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

316

COVER LETTER

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

SUBJECT: Vosburg Services, 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: Dora Vosburg
Name (Printed or typed)

3780 Maple Grove Ct.
Address

Port Orange, FL. 32129-8995
City, State & Zip

(386) 760-0629
Daytime Telephone number

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

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TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Vosburg Services, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

3780 Maple Grove Ct
Port Orange, FL 32129-8995

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To serve the Disabled with assistance and training to become part of the community

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Dora Vosburg 3780 Maple Grove Ct. Port Orange, FL. 32129-8995 President / Director
John Vosburg 3780 Maple Grove Ct. Port Orange, FL. 32129-8995 Vice President / Director

ARTICLE VI REGISTERED AGENT

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

John Vosburg 3780 Maple Grove Ct. Port Orange, FL. 32129-8995

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Dora Vosburg 3780 Maple Grove Ct. Port Orange, FL. 32129-8995

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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

John Vosburg John Vosburg — 3/1/2007
Signature/Registered Agent — Date

Dora Vosburg DORA Vosburg — 3-1-2007
Signature/Incorporator — Date