

(((H070001439563)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)205-0381

Account Name : CORPORATION SERVICE COMPANY

Account Number : I20000000195 Phone : (850)521-1000 Fax Number : (850)558-1575

FLORIDA PROFIT/NON PROFIT CORPORATION

Z Visa Law Center, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$70.00

Electronic Filing Menu

Corporate Filing Menu





FLORIDA DEPARTMENT OF STATE
Division of Corporations

CSC

SUBJECT: Z VISA LAW CENTER, INC.

REF: W07000025719

May 30, 2007

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The person designated as registered agent in the document and the person signing as registered agent must be the same.

If you have any further questions concerning your document, please call (850) 245-6931.

Becky McKnight Document Specialist New Filing Section FAX Aud. #: H07000143956 Letter Number: 607A00037107

ARTÍCLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME

The name of the corporation shall be:

Z VISA LAW CENTER, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

4300 N. UNIVERSITY DRIVE SUITE# B-200 SUNRISE, FLORIDA 33351

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

IMMIGRATION & NATURALIZATION SERVICE

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):

GORDON S. DANIELS -PRESIDENT LISA L. DANIELS- SECY-TREASURER

ARTICLE VI REGISTERED AGENT

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

GORDON S. DANIELS 4300 NORTH UNIVERSITY DR. SUITE- B-200 SUNRISE FLORIDA 33351

ARTICLE VII INCORPORATOR

The vame and address of the Incorporator is:

GORDON S. DANIELS

4300 NORTH UNIVERSITY DRIVE SUITE # B-200

SUNRISE, FLORIDA 33351

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

Signature/Registered Agent

Signature/Incorporator

<u>5-31-000</u>

5 . D . . .

Date