

P07000/09470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

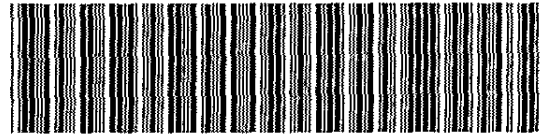
(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SATORIA MULTISERVICES, 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: VICTORIA TICA
Name (Printed or typed)

5957 HIGH GLEN DRIVE
Address

LAKELAND, FL 33813
City, State & Zip

(863) 701 7256
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:

SATORIA MULTISERVICES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/ mailing address is:

5957 HIGH GLEN DRIVE
LAKELAND, FL 33813

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The corporation shall engage in any business or activity permitted under the laws of THE UNITED STATES and State of Florida

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000 one million

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

VICTORIA TICA
5957 HIGH GLEN DRIVE
LAKELAND, FL 33813

ARTICLE VI REGISTERED AGENT

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

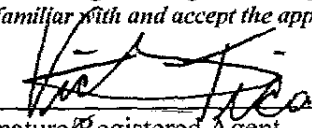
VICTORIA TICA
5957 HIGH GLEN DRIVE
LAKELAND, FL 33813

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

VICTORIA TICA
5957 HIGH GLEN DRIVE
LAKELAND, FL 33813

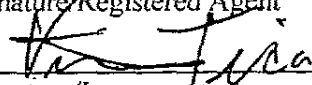
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent

09/24/2007

Date



Signature/Incorporator

09/24/2007

Date

FILED
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CLERK OF STATE
TALLAHASSEE, FLORIDA