

P080000069652

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

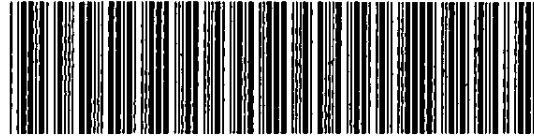
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800133123528

07/22/08--01031--018 **78.75

FILED
08 JUL 22 AM 8:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ps

COVER LETTER

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

SUBJECT: ZORHEK, 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
ADDITIONAL COPY REQUIRED	

FROM: Richard J. Roth
Name (Printed or typed)

9271 SW 136 Street Circle
Address

Miami, FL 33176
City, State & Zip

ops0303@aol.com
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:

ZORHEK, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

5325 N.W. 189 STREET
MIAMI, FL 33055

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL PURPOSES

ARTICLE IV SHARES

The number of shares of stock is:

1,000 SHARES @ \$1.00 PER SHARE PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ROCIO FALLA, President & Secretary
5325 N.W. 189 STREET
MIAMI, FL 33055

ARTICLE VI REGISTERED AGENT

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

ROCIO FALLA
5325 N.W. 189 STREET
MIAMI, FL 33055

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROCIO FALLA
5325 N.W. 189 STREET
MIAMI, FL 33055

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

Rocio Falla [Signature]
Signature/Registered Agent

JULY 18, 2008

Date

Rocio Falla [Signature]
Signature/Incorporator

JULY 18, 2008

Date

FILED
08 JUL 22 AM 8:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA