

P09000034999

(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:

~~W09-13331~~

Office Use Only

4/20



200146133092

03/19/09--01021--024 **78.75

APPROVED
AND
FILED
09 APR 17 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 APR 17 AM 11:43

DIVISION OF CORPORATION

March 20, 2009

GUSTAVO ORTIZ
7371 SW 10 ST.
MIAMI, FL 33144

SUBJECT: ORTIZ DELIVERY COMPANY
Ref. Number: W09000013331

We have received your document for ORTIZ DELIVERY COMPANY and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6934.

Loria Poole
Regulatory Specialist II

Letter Number: 309A00009597

COVER LETTER

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

SUBJECT: ORTIZ DELIVERY COMPANY

(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

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: GUSTAVO ORTIZ

Name (Printed or typed)

7371 SW 10 ST

Address

MIAMI, FLORIDA 33144

City, State & Zip

786-31021299

~~786-301-1299~~

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:

ORTIZ DELIVERY COMPANY

ARTICLE II PRINCIPAL OFFICE

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

7371 SW 10 ST MIAMI FL 33144

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

PROFIT-TRUCK DELIVERIES

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):

GUSTAVO ORTIZ, PRESIDENT

ARTICLE VI REGISTERED AGENT

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

GUSTAVO ORTIZ
7371 SW 10 ST
MIAMI, FL 33144

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

GUSTAVO ORTIZ
7371 SW 10 ST
MIAMI, FL 33144

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

Signature/Incorporator

Date

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09 APR 17 PM 4:50

APPROVED
AND
FILED