

P10000006373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

(Business Entity Name)

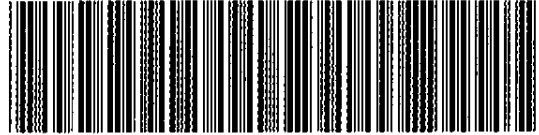
(Document Number)

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01/08/10--01029--020 **78.75

10 JAN 20 PM 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

1/1

COVER LETTER

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

SUBJECT: Publishing/Trucking
(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: Alpha Jonphe Corp.
Name (Printed or typed)

6405 Merriewood Drive
Address

Orlando FL 32818
City, State & Zip

407-272-7455
Daytime Telephone number

AlphaJonphe@yahoo.com
E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 11, 2010

MARITZA BRANSKY
6405 MERRIEWOOD DR
ORLANDO, FL 32818

SUBJECT: ALPHA JONPHE
Ref. Number: W10000001193

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

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of 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) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 110A00000787

APPROVED
AND
FILED

10 JAN 20 PM 3:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Alpha Jonphe, Corp.

ARTICLE II PRINCIPAL OFFICE

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

6405 Merriewood DR
Orlando, FL 32818

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

publishing, and trucking
business

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jonphe A. Guilamo
6405 Merriewood DR
Orlando, FL 32818

ARTICLE VI REGISTERED AGENT

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

Maritza Bransky, 6405 Merriewood DR
Orlando, FL 32818

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Teodora A. Guilamo
6405 Merriewood DR
Orlando, FL 32818

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

Maritza Bransky

Signature/Registered Agent

Teodora A. Guilamo

Signature/Incorporator

1-5-10

Date

1-5-10

Date