

P10000055474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

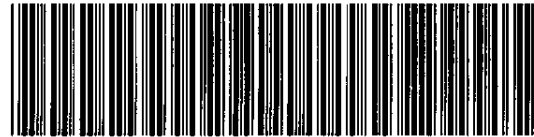
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10 JUL -2 AM 11:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

Ps 7/6/10

COVER LETTER

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

SUBJECT: Collaborating WSC 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: Veronica Neria
Name (Printed or typed)

P.O. Box 151988
Address

Cape Coral, FL 33915
City, State & Zip

(239) 362-5552
Daytime Telephone number

runner26.2wsc@yahoo.com
E-mail address: (to be used for future annual report notification)

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:

Collaborating WSC Inc.

ARTICLE II PRINCIPAL OFFICE

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

Street address: 72 Pondella Rd. #106

North Fort Myers, FL 33903

Mailing address: P.O. Box 151988 Cape Coral, FL 33915

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To assist individuals with developmental disabilities

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):

Veronica Neria
P.O. Box 151988
Cape Coral, FL
33915

ARTICLE VI REGISTERED AGENT

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

Alice Neria
72 Pondella Rd. #106
North Fort Myers, FL 33903

ARTICLE VII INCORPORATOR

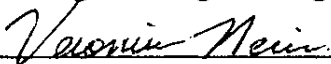
The name and address of the Incorporator is:

Veronica Neria
P.O. Box 151988
Cape Coral, FL 33915

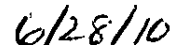
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Signature/Registered Agent



Signature/Incorporator



Date



Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 JUL -2 AM 11:14

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AND
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