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COVER LETTER

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

SUBJECT: Rodriguez Educational Services, 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: Noreen M. Rodriguez

Name (Printed or typed)

17712 Crystal Cove Place

Address

Lutz, FL 33548

City, State & Zip

(813) 909-1069

Daytime Telephone number

norod@tampabay.rr.com

E-mail address: (to be used for future annual report notification)

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

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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: Rodriguez Educational Services, Inc.

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ARTICLE II PRINCIPAL OFFICE

Principal street address
17712 Crystal Cove Place
Lutz, FL 33548

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Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
education

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Noreen M. Rodriguez, President
Address: 17712 Crystal Cove Place
Lutz, FL 33548

Name and Title: _____
Address: _____

Name and Title: David A. Eyfe, Vice President
Address: 17712 Crystal Cove Place
Lutz, FL 33548

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Noreen M. Rodriguez
Address: 17712 Crystal Cove Place
Lutz, FL 33548

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Noreen M. Rodriguez
Address: 17712 Crystal Cove Place
Lutz, FL 33548

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

Noreen M. Rodriguez
Required Signature/Registered Agent

10/4/2010
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Noreen M. Rodriguez
Required Signature/Incorporator

10/4/2010
Date