

P1 0000086712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

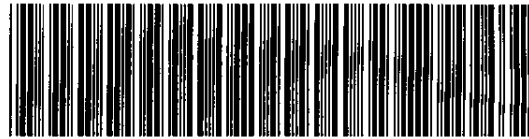
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
DIVISION OF REG.  
2010 OCT 21 PM 4:13

for 10/22/10

## COVER LETTER

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

SUBJECT: EASY WAY ON THE WAY, 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: SUSAMAR MOREIRA

Name (Printed or typed)

10904 RAVEL COURT

Address

BOCA RATON, FL 33498

City, State & Zip

561 674 6652

Daytime Telephone number

CLAUDIONASCIMENTO8@YAHOO.COM

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

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**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:

EASY WAY ON THE WAY, INC.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address

10904 RAVEL COURT

BOCA RATON FL

33498

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

REMODELING

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: SUSAMAR MOREIRA PRESIDENT

Address: 10904 RAVEL COURT

BOCA RATON 33498

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

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: SUSAMAR MOREIRA

Address: 10904 RAVEL COURT

FLORIDA 33498

**ARTICLE VII INCORPORATOR**

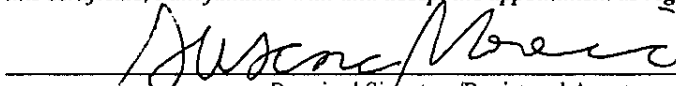
The name and address of the Incorporator is:

Name: CLAUDIO NASCIMENTO

Address: 10904 RAVEL COURT

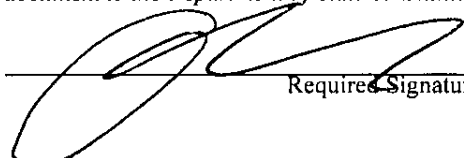
BOCA RATON FL 33498

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

  
\_\_\_\_\_  
Required Signature/Registered Agent

10/18/10  
\_\_\_\_\_  
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.

  
\_\_\_\_\_  
Required Signature/Incorporator

10/18/10  
\_\_\_\_\_  
Date