

P10000093953

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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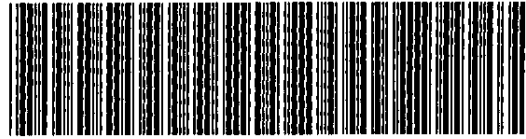
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: PARTO, 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: Patti Olshen
Name (Printed or typed)

21702 Cromwell Circle
Address

Boca Raton FL 33486
City, State & Zip

561-367-1514
Daytime Telephone number

parto1943@hotmail.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: PARTO, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

21702 Cromwell Circle

Boca Raton

FL 33486

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: TRAVEL AGENT

*** effective January 1, 2011

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Patti Olshen, President

Address: 21702 Cromwell Circle

Boca Raton FL 33486

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: Patti Olshen

Address: 21702 Cromwell Circle

Boca Raton FL 33486

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Patti Olshen

Address: 21702 Cromwell Circle

Boca Raton FL 33486

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

Patti Olshen

Required Signature/Registered Agent

11-12-10

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.

Patti Olshen

Required Signature/Incorporator

11-12-10

Date

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