PIOOL3343

(Requestor's Name)				
(Address)				
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(Adi	laress)			
(Cit	ty/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special instructions to Filling Officer. CAVE				
AUTHORIZATION BY PHONE TO				
CORRECT SULLY SHOW				
DATE				
DOC. EXAM PS				
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Office Use Only



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COVER LETTER

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

SUBJECT: I V & Co.	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROм: Ivette W Alvarez	
7801 Belvoir Drive	(Printed or typed) ddress
Orlando Florida 32835	State & Zip
3213324098 Daytime Te	elephone number
Jigmp1@aol.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 II	PRINCIPAL OFFICE		
_	Principal street address	Mailing	address, if different is:
	7801 Belvoir Dr		
Ω	Orlando Fl 32835		
ARTICLE III	DIPDOGF		
	hich the corporation is organized is:		
.no parposo for w	mon are corporation is organized is.		
ARTICLE IV	SHARES		
	res of stock is: 1		
ARTICLE V	INITIAL OFFICERS AND/OR DIREC	TOPS	
	itle: Ivette W Alvarez		
Address:	7801 Belvoir Dr	Address:	
	Orlando Florida 32835		
			
Name and Ti	itle:	Name and Title:	<u> </u>
Address:			the same of the sa
			The Table 1
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			28 国
	itle:		56.
Address:		Address:	
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	REGISTERED AGENT	-1-> -64	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠
ne <u>name and Fio</u> Name:	rida street address (P.O. Box NOT acceptal Ivette w Alvarez	ole) of the registered agent is:	
Address:	7801 Belvoir Dr		
Address.	Orlando Florida 32835		
			
ARTICLE VII	INCORPORATOR Iress of the Incorporator is:		
Name:	Ivette W Alvarez		
Address:	7801 Belvoir Dr		
Addiess.	Orlando Florida 32835		
Invino been no	ed as registered agent to accept service of p	racess for the above stated com	poration at the place designated
his certificate, Lan	n familiar with and accept the appointment	rocess for the above states corp as registered agent and agree to	act in this capacity
		0 0	
· · · · · · · · · · · · · · · · · · ·			02-24-2011
	Required Signature/Registered Agen	t	Date
submit this docu	ment and affirm that the facts stated herei	n are true. I am aware that th	e false information submitted is
ocument to the De	epartment of State lighstitutes a third degree	felony as provided for in s.817.	155, F.S.
Phonisad Signature/Indonesia		02-24-2011	
Required Signature/Incorporator		Date	