

PI1000026102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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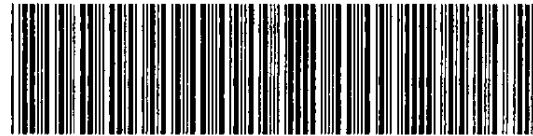
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 MAR 14 PM 1:35

APPROVED
AND
FILED

VH

COVER LETTER

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

SUBJECT: A Mobile Notary Company
(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: Melina S. Arias
Name (Printed or typed)

7805 N. Cortez Ave.
Address

Tampa, FL 33614
City, State & Zip

813-817-9065
Daytime Telephone number

melina.arias@verizon.net
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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

A Mobile Notary Company

11 MAR 14 PM 1:35

ARTICLE II PRINCIPAL OFFICE

Principal street address

7805 N. Cortez Ave.

Tampa, FL 33614

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

to provide notarial services for businesses and individuals on a mobile basis.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Melina S. Arias - President

Address: 7805 N. Cortez Ave.

Tampa, FL 33614

Name and Title: Melina S. Arias - Treasurer

Address: 7805 N. Cortez Ave.

Tampa, FL 33614

Name and Title: Melina S. Arias - Vice President

Address: 7805 N. Cortez Ave.

Tampa, FL 33614

Name and Title: _____

Address: _____

Name and Title: Melina S. Arias - Secretary

Address: 7805 N. Cortez Ave.

Tampa, FL 33614

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: Melina S. Arias

Address: 7805 N. Cortez Ave.

Tampa, FL 33614

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Melina S. Arias

Address: 7805 N. Cortez Ave.

Tampa, FL 33614

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

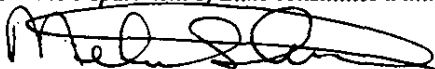


Required Signature/Registered Agent

03/09/2011

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

03/09/2011

Date