

P110000049574

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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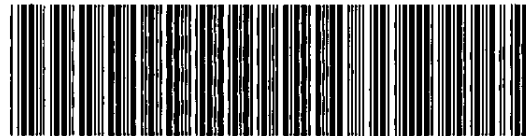
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2011 MAY 24 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SC 5/27

COVER LETTER

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

SUBJECT: PHONE MATES, 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: EVELINE DSOUZA
Name (Printed or typed)

111061 Langley Pl
Address

Davie FL-33325
City, State & Zip

954-453-4015
Daytime Telephone number

eve@atcbilling.com
E-mail address: (to be used for future annual report notification)

SECRETARY OF STATE
TALLAHASSEE, FL 32314

2011 MAY 24 PM 2:30

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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:

PHONEMATES, Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

14061 Langley Pl
DAVIE FL 33325

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

AUDIOTEXT SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100 shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: EVELINE DSOUZA
Address: 14061 Langley Pl
DAVIE FL 33325

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: EVELINE DSOUZA
Address: 14061 Langley Pl
DAVIE FL 33325

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: EVELINE DSOUZA
Address: 14061 Langley Pl
DAVIE FL 33325

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

5/17/2011
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

5/17/2011
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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