

P110000060981

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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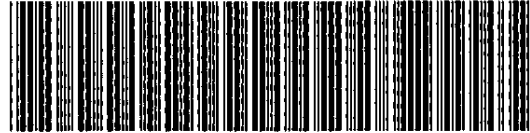
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11 JUL -1 AM 11:51
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
7/5

COVER LETTER

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

SUBJECT: **US. STOREFRONTS Glass & Mirrors 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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: **JAIME FERNANDEZ**

Name (Printed or typed)

5352 Sedona Creek Ct

Address

Kissimmee Fl. 34758

City, State & Zip

407-480-8959

Daytime Telephone number

info@usstorefronts.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 I NAME

US. STOREFRONTS Glass & Mirrors Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

5352 Sedona Creek Ct.

Kissimmee Fl. 34758

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Make storefronts (aluminum and glass) on sites .

ARTICLE IV SHARES

The number of shares of stock is: **1000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **JAIME FERNANDEZ ceo.**

Address:

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: **JAIME FERNANDEZ**

Address: **5352 Sedona Creek Ct**

Kissimmee Fl. 34758

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **JAIME FERNANDEZ**

Address: **5352 Sedona Creek Ct**

Kissimmee Fl. 34758

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

06-28-2011

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

06-28-2011

Date

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TALLAHASSEE-FLORIDA