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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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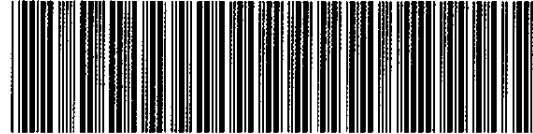
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FEDERAL BUREAU OF INVESTIGATION
U.S. DEPARTMENT OF JUSTICE

W 11-29659

COVER LETTER

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

SUBJECT: A & D Enterprises 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: David and Audrey Vanek

Name (Printed or typed)

4445 Avanti Circle

Address

North Port, Florida, 34287

City, State & Zip

941-408-8444

Daytime Telephone number

d_vanek@yahoo.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

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TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE

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: VANEK Ventures Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

David Vanek

4445 Avanti Circle

North Port, FL 34287

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Internet sales

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: David Vanek President

Address: 4445 Avanti Circle

North Port, FL 34287

Name and Title: _____

Address: _____

Name and Title: Audrey Vanek Vice Present

Address: 4445 Avanti Circle

North Port, FL 34287

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: David Vanek

Address: 4445 Avanti Circle

North Port, FL 34287

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Audrey Vanek

Address: 4445 Avanti Circle

North Port, FL 34287

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

David Vanek

Required Signature/Registered Agent

7/21/11

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.

Audrey Vanek

Required Signature/Incorporator

7/21/11

Date

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2011 AUG -5 AM 10:07
CLERK OF THE STATE
TALLAHASSEE, FLORIDA