

P12000023451

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

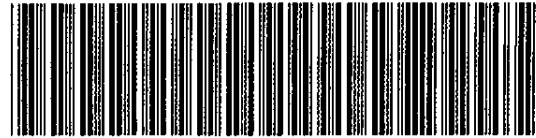
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/08/12--01015--021 **87.50

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12 MAR -8 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
3/9/12

COVER LETTER

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

SUBJECT: OPAL ADVANCE SERVICES, 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: OLUSOLA I PALACIOS

Name (Printed or typed)

902 SPRING CIRCLE #204

Address

DEERFIELD BEACH, FLORIDA 33441

City, State & Zip

954 482-0215

Daytime Telephone number

OPALTRUCKING@GMAIL.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

OPAL ADVANCE SERVICES, INC.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
902 SPRING CIRCLE #204
DEERFIELD BEACH, FLORIDA 33441

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
SERVICE BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: OLUSOLA I PALACIOS, PRESIDENT
Address: 902 SPRING CIRCLE #204
DEERFIELD BEACH, FLORIDA 33441

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

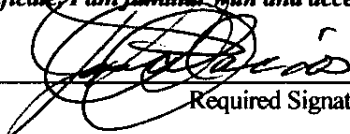
Name: JOSE PALACIOS
Address: 902 SPRING CIRCLE #204
DEERFIELD BEACH, FLORIDA 33441

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: OLUSOLA I PALACIOS
Address: 902 SPRING CIRCLE #204
DEERFIELD BEACH, FLORIDA 33441

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

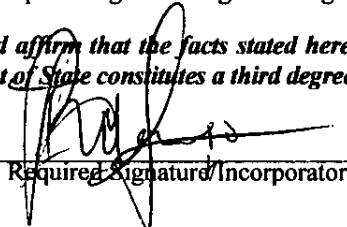


Required Signature/Registered Agent

03/06/2012

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

03/06/2012

Date