

P/2000025099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

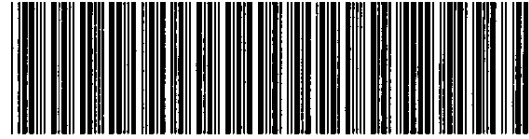
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
12 MAR 13 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch MAR 14 2012

COVER LETTER

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

SUBJECT: SORKO ENVIRONMENTAL 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: Maria C Okros
Name (Printed or typed)

631 Applewood Ave
Address

Altamonte Springs Florida 32714
City, State & Zip

407-432-4535
Daytime Telephone number

sorkoenviro@yahoo.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

Sorko Environmental, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
631 Applewood Ave
Altamonte Springs FL 32714

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Sale and installation of Sod

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Maria C Okros-president
Address: 631 Applewood Ave
Altamonte Springs FL 32714

Name and Title: Stephen D Okros v. president
Address: 604 Applewood Ave
Altamonte Springs FL 32714

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: Maria C Okros
Address: 631 Applewood Ave
Altamonte Springs FL 32714

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Maria C Okros
Address: 631 Applewood Ave
Altamonte Springs FL 32714

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

Handwritten signature of Maria C Okros

Required Signature/Registered Agent

3/5/2012

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.

Handwritten signature of Maria C Okros

Required Signature/Incorporator

3/5/2012

Date

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