

P12000027145

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

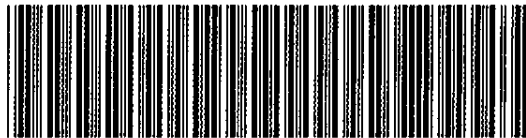
(Document Number)

Certified Copies _____

Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



000224849920

03/19/12--01030--005 **78.75

三

72 MAR 19 PM 1:20

THE
FEDERAL
BUREAU OF
INVESTIGATION
U. S. DEPARTMENT OF JUSTICE

COVER LETTER

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

SUBJECT: Office Reworks, 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: Vern Glassman

Name (Printed or typed)

2054 Alta Meadows Lane #2405

Address

Delray Beach, Florida 33444

City, State & Zip

561-445-2756

Daytime Telephone number

vern.glassman@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

The name of the corporation shall be: Office Reworks, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
2054 Alta Meadows Lane #2405
Delray Beach, Florida 33444

FILED
12 MAR 19 PM 1:20
Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Office furniture sales and service.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Vern Glassman, President</u>	Name and Title:	_____
Address:	<u>2054 Alta Meadows Lane #2405</u>	Address:	_____
	<u>Delray Beach, Florida 33444</u>		_____

Name and Title:	<u>Marta Glassman, Vice President</u>	Name and Title:	_____
Address:	<u>2054 Alta Meadows Lane #2405</u>	Address:	_____
	<u>Delray Beach, Florida 33444</u>		_____

Name and Title:	_____	Name and Title:	_____
Address:	_____	Address:	_____
	_____		_____

ARTICLE VI REGISTERED AGENT

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

Name: Vern Glassman
Address: 2054 Alta Meadows Lane #2405
Delray Beach, Florida 33444

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Vern Glassman
Address: 2054 Alta Meadows Lane #2405
Delray Beach, Florida 33444

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

03/15/2012

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

03/15/2012

Date