

P12000034950

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

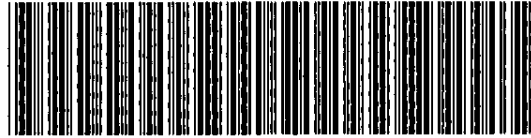
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
4/12/12

COVER LETTER

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

SUBJECT: Ungvarsky Corp.

(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: Joe Ungvarsky

Name (Printed or typed)

9801 #4 Gulf Drive

Address

Anna Maria, FL 34216

City, State & Zip

941-779-4630

Daytime Telephone number

juremodel1@aol.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: Ungvarsky Corp.

ARTICLE II PRINCIPAL OFFICE

Principal street address
9801 #4 Gulf Drive
Anna Maria, FL 34216

Mailing address, if different is:

P.O.Box 2052
Anna Maria, FL 34216

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

The purpose is to engage in any activities or business permitted under the laws of the United States and Florida

ARTICLE IV SHARES

The number of shares of stock is: The corporation is authorized to issue ONE HUNDRED ,(100) shares of common stock, all of one (1) class, at ONE DOLLAR (\$1.00) par value.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Joe Ungvarsky
Address: 9801 #4 Gulf Drive
Anna Maria, FL 34216

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: Joe Ungvarsky
Address: 9801 #4 Gulf Drive
Anna Maria, FL 34216

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Joe Ungvarsky
Address: P.O.Box 2052
Anna Maria, FL 34216

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

02-16-2012

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

02-16-2012

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA