

P 12000045216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

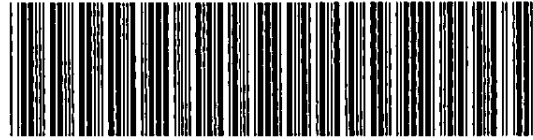
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 MAY 14 PM 2:15

5/15/12

COVER LETTER

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

SUBJECT: QUILTING BY C. &V, 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: CARMEN VALENTIN

Name (Printed or typed)

1411 SW 12 AVE STE 2

Address

POMPANO BEACH FL 33069

City, State & Zip

Daytime Telephone number

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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SECRETARY OF STATE
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May 08, 2012

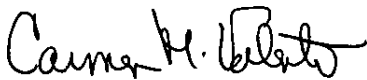
Dear Sir/Madam

My name is Carmen M. Valentin with present address at 1411 SW 12 Ave Suite 2, Pompano Beach FL 33069 owner of =Quilting by C&V, Inc that was dissolved on 9/23/2011. I like to inform that I have no intention to reopen this Corp.

I like to open a new Corporation using the same name : Quilting by C & V, Inc

Please call me if you need more information:((954)946-3773

Sincerely,



Carmen M. Valentin

G

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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: QUILTING BY C&V, INC

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ARTICLE II PRINCIPAL OFFICE

Principal street address
1411 SW 12 AVE SUITE 2
POMPANO BEACH FL 33069

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is 500 SHARES @ 1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CARMEN M. VALENTIN Name and Title: _____
Address: 1411 SW 12 AVE SUITE 2 Address: _____
POMPANO BEACH FL 33069

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

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:

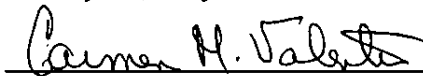
Name: CARMEN M. VALENTIN
Address: 1411 SW 12 AVE SUITE 2
POMPANO BEACH FL 33069

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CARMEN M. VALENTIN
Address: 1411 SW 12 AVE SUITE 2
POMPANO BEACH FL 33069

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

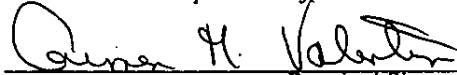


Required Signature/Registered Agent

05/08/2012

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

05/08/2012

Date