

P12000052699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

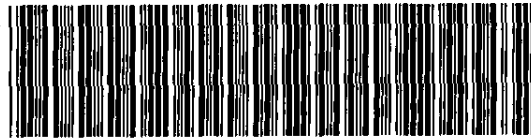
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12 JUN - 6 AM 7:22

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[Signature]

## COVER LETTER

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

SUBJECT: Ydeal, 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: Jose C. Vasquez

Name (Printed or typed)

5996 Bent Pine Drive, Suite 3303

Address

Orlando, FL. 32822

City, State & Zip

321.3776577

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.**

**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: Ydeal, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
5996 Bent Pine Drive  
Suite 3303  
Orlando, FL 32822

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: 1 000 000 000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Jose C. Vasquez, Title: P  
Address: 9201 Sunrise Lakes Blvd.  
Building 108 #102  
Sunrise, FL 33322

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: Jose C. Vasquez  
Address: 5996 Bent Pine Drive, Suite 3303  
Orlando, FL 32822

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Jose C. Vasquez  
Address: 5996 Bent Pine Drive, Suite 3303  
Orlando, FL 32822

*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

6/01/2012

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

6/01/2012

Date

12 JUN - 6 AM 7:22  
RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL