

P12000060293

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

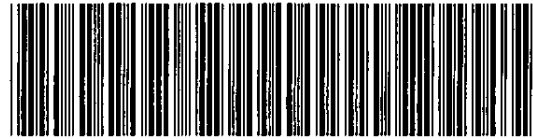
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/09/12--01046--008 ^{70.00} ~~**700.00~~

12 JUL -9 PM12:59
DIVISION OF CORPORATIONS
SECRETARY OF STATE

7/10
8

COVER LETTER

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

SUBJECT: Talia's Administrative Services, 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: Talia Suglio

Name (Printed or typed)

956 Chevy Chase Street

Address

Port Charlotte, FL 33948

City, State & Zip

941-204-1825

Daytime Telephone number

sonnybunny22@yahoo.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

CP 575 A

Your Telephone Number Best Time to Call DATE OF THIS NOTICE: 06-26-2012

EMPLOYER IDENTIFICATION NUMBER: 45-5573182
FORM: SS-4 NOBOD

TALIAS ADMINISTRATIVE SERVICES INC
956 CHEVY CHASE STREET
PORT CHARLOTTE, FL 33948

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:

Talia's Administrative Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

956 Chevy Chase Street

Port Charlotte, FL 33948

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Administrative Services

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Talia Suglio - President

Address: 956 Chevy Chase Street

Port Charlotte, FL 33948

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: Talia Suglio

Address: 956 Chevy Chase Street

Port Charlotte, FL 33948

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Talia Suglio

Address: 956 Chevy Chase Street

Port Charlotte, FL 33948

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

Talia Suglio

Required Signature/Registered Agent

6-29-12

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.

Talia Suglio

Required Signature/Incorporator

6-29-12

Date

12 JUL - 9 PM 1:00
DIVISION OF CORPORATIONS