

P 1200 0065175

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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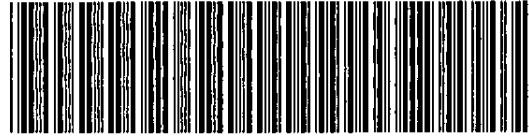
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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07/25/12--01007--006 **78.75

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12 JUL 25 AM 9:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: VIP Movers 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: Miguel A. Torres

Name (Printed or typed)

676 Jamestown Boulevard

Address

Altamonte Springs, Florida 32714

City, State & Zip

407-937-8943

Daytime Telephone number

MiguelT142@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: **VIP Movers Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
2822 Palm Isle Way
Orlando, Florida 32829

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Commercial and Residential Moving Services

ARTICLE IV SHARES

The number of shares of stock is: **500**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Miguel A. Torres Title: President**
Address: **676 Jamestown Boulevard**
Altamonte Springs, Florida 32714

Name and Title: _____
Address: _____

Name and Title: **Jean P. Alomar Title: Vice President**
Address: **2822 Palm Isle Way**
Orlando, Florida 32829

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:

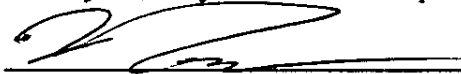
Name: **Miguel A. Torres**
Address: **676 Jamestown Boulevard**
Altamonte Springs, Florida 32714

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Miguel A. Torres**
Address: **676 Jamestown Boulevard**
Altamonte Springs, Florida 32714

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

7-22-12

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.



Required Signature/Incorporator

7-22-12

Date

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TALLAHASSEE, FLORIDA