

P12000079158

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

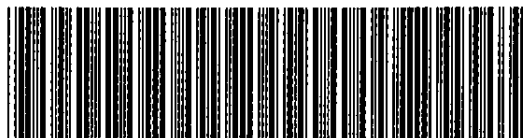
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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: VILLARAN AND SON Professional Photography LLC
(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: LOUIS VILLARAN
Name (Printed or typed)

140 SUAREZ DRIVE
Address

KISSIMMEE FL 34743
City, State & Zip

407-729-3530
Daytime Telephone number

louis@villaranandson.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 5, 2012

LOUIS VILLARAN
140 JUAREZ DRIVE
KISSIMMEE, FL 34743

SUBJECT: VILLARAN AND SON PROFESSIONAL PHOTOGRAPHY INC.
Ref. Number: W12000045886

We have received your document for VILLARAN AND SON PROFESSIONAL PHOTOGRAPHY INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 012A00022474

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: VILLARIN AND SON Professional Photography LLC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

140 JUAREZ DRIVE
KISSIMMEE FL 34743

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Professional Business Photography.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: LOUIS VILLARIN
Address: PRECEDENT

140 JUAREZ DRIVE
KISSIMMEE, FL 34743.

Name and Title: _____
Address: _____

Name and Title: 11
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: LOUIS VILLARIN

Address: 140 JUAREZ DRIVE
KISSIMMEE, FL 34743.

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: LOUIS VILLARIN

Address: 140 JUAREZ DRIVE
KISSIMMEE, FL 34743.

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

[Signature]
Required Signature/Registered Agent

Aug 31 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.

[Signature]
Required Signature/Incorporator

Aug 31 12
Date