

P12000090547

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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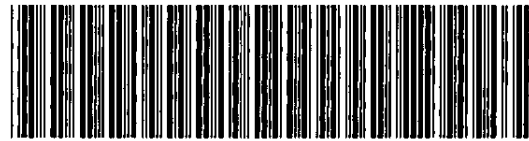
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/26/12--01014--007 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 OCT 26 AM 10:51

Ps 10/29/12

COVER LETTER

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

SUBJECT: Pagosa Solutions, 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: Linda South

Name (Printed or typed)

137 South Courtenay Pkwy #712

Address

Merritt Island FL 32952

City, State & Zip

321-302-5413

Daytime Telephone number

lsouth@lindasouth.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)

F.H.E.S.
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 OCT 26 AM 10:51

ARTICLE I NAME

The name of the corporation shall be: **Pagosa Solutions, Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
137 South Courtenay Pkwy
#712
Merritt Island FL 32952

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
To provide Professional Business Services

ARTICLE IV SHARES

The number of shares of stock is **501**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Linda South, President, Secretary, Treasurer**
Address: **137 South Courtenay Pkwy**
#712
Merritt Island FL 32952

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: **Linda South**
Address: **137 S. Courtenay Pkwy #712**
Merritt Island FL 32952

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Linda South**
Address: **137 S. Courtenay Pkwy #712**
Merritt Island FL 32952

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

10/23/12

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

10/23/12

Date