P14000	38309	
(Requestor's Name) (Address)	500259549135	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name)	04/29/1401009006 **78.75	
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	Š	
Office Use Only	FILED 14 APR 29 PM 3: 30 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
	5/1/14	

	R LETTER		44
Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314			
SUBJECT: ACRYLINKS, INC.	FE NAME – <u>MUST INCLU</u>	<u>DE SÚFFIX</u>)	
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	a check for:	
 \$70.00 \$78.75 Filing Fee & Certificate of Status 	□ \$78.75 Filing Fee & Certified Copy	State	
V#838 Enclosed	ADDITIONAL COI	Status PY REQUIRE	D
FROM: ACRYLINKS, INC	C. / L. KELLE	ER	
1969 S. ALAFAY	•••	30	
ORLANDO, FL 3	ZOZO State & Zip		
407-982-4657			· · ·
	elephone number		SECT
ACRYLINKS@OUT E-mail address: (to be used		otification)	FILED PR 29 PH RETARY OF AHASSEE, F
NOTE: Please provide the or	iginal and one copy of 1	the articles.	FILED IL APR 29 PH 3: 31 SECRETARY OF STATE ALLAHASSEE, FLORIDA

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ARTICLES OF INCOR In compliance with Chapter 607 and/or PICLE I NAME name of the corporation shall be: ACRYLINKS, INC PICLE II PRINCIPAL OFFICE	• • • • • • • • • • • • • • • • • • •	ECTIVE DATE de
Principal <u>street</u> address 69 S. ALAFAYA TRAIL	Mailing address, if different is: 1969 S. ALAFAYA TRAIL	
0	230	
RLANDO FL 32828	ORLANDO F	L 32828
<u>TCLE III PURPOSE</u> purpose for which the corporation is organized is: PROFE	SSIONAL ORGA	NIZATION.
* PLEASE SEE ATTACHMENT RE		
EFFECTIVE DATE OF JUNE 1, 2	2014. ****	
		THE F
ICLE V INITIAL OFFICERS AND/OR DIRECTORS		FILED APR 29 PM 3: 31 CRETARY OF STATE LAHASSEE, FLORID
ICLE V INITIAL OFFICERS AND/OR DIRECTORS		PH 3: 3 YOF STAT
Name and Title:	Address:	PH 3: 31 Y OF STATE FLORIDA

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			(conti.)
Name a	nd Title:	_ Name and Title:	
Addres		Address:	
			····
	<u>REGISTERED AGENT</u> Florida street address (P.O. Box NOT acceptable) o L. KELLER	of the registered agent is:	
Name: Address:	1969 S. ALAFAYA TRAIL	-	
Address:	ORLANDO FL 32828	_	
		_	
ARTICLE VII	INCORPORATOR		
The <u>name and a</u>	address of the Incorporator is:		
Name:	L. KELLER	_	
Address:	1969 S. ALAFAYA TRAIL	<u> </u>	
	ORLANDO, FL 32828		
Having been na his certificate, l	amed as registered agent to accept service of proces am familiar with and accept the appointment as re	gistered agent and agree to act in t	at the place designated in his capacity ./18/2014
	Required Signature/Registered Agent		Date
submit this do locument to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felow	true. I am aware that the false in ay as provided for in s.817.155, F.S.	<i>iformation submitted in a</i> S.
	AN		4/18/2014
	Required Signature/Incorporator		Date
			F 14 APR : SECRETA TALLAHA
* Ada	tendum A: Effective Attach	edute 6/1/14	<u>o</u> ;
			ATE DRIDA

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Addendum A

To Whom It May Concern:

PLEASE SET THE COMPANY ACRYLINKS, INC. WITH AN INCORPORATION EFFECTIVE DATE OF JUNE 1, 2014.

THANK YOU.

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