

P14000043460

(Requestor's Name)

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(Business Entity Name)

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FILED
14 MAY 12 AM 10:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: OV Remodeling 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: Orlando Luis Viera Becerra
 Name (Printed or typed)
1045 Moss Hart Ln.
 Address
Orlando FL 32825
 City, State & Zip
407-501-1283
 Daytime Telephone number
orlandoviera302@hotmail.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:

OV Remodeling Services Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1045 Mossheart Ln
Orlando FL 32825

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

construction services

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: director: Orlando Viera

Name and Title:

Address

1045 Mossheart Ln
Orlando FL 32825

Address:

Name and Title:

Name and Title:

Address

Address:

Name and Title:

Name and Title:

Address

Address:

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(cont.)

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Orlando Luis Viera Becerra
Address: 1045 Mosshart Ln
Orlando FL 32825

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Orlando Luis Viera Becerra
Address: 1045 Mosshart Ln
Orlando FL 32825

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

5/6/2014
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

5/6/2014
Date

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