

PI4 000049596

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

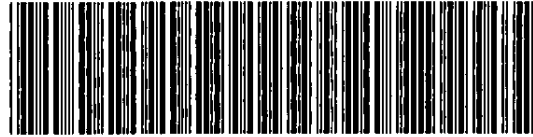
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600260898176

06/05/14--01003--008 **78.75

FILED
SECRETARY OF STATE
DIVISION OF BUSINESS
14 JUN -5 AM 9:11

ACW
6/10/14

COVER LETTER

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

SUBJECT: Saloi D. Gagel Interpreting, 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: Saloi D. Gagel

Name (Printed or typed)

503 6th Street

Address

Vero Beach, FL 32960

City, State & Zip

772-713-0292

Daytime Telephone number

saloi20@aol.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: Saloi D. Gagel Interpreting, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

503 6th Street

Vero Beach, FL 32960

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for interpreting.

ARTICLE IV SHARES

The number of shares of stock is: 500 @ \$1.00 par value

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Saloi D. Gagel, President

Name and Title: _____

Address 503 6th Steet

Address: _____

Vero Beach, FL 32960

Name and Title: Saloi D. Gagel, Sec/Treasurer

Name and Title: _____

Address 503 6th Street

Address: _____

Vero Beach, FL 32960

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL -5 AM 9:11

(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: Saloi D. Gagel
Address: 503 6th Street
Vero Beach, FL 32960

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Donna L. Wright
Address: 644 16th Street
Vero Beach, FL 32960

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

June 1, 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.


Required Signature/Incorporator

June 1, 2014

Date