

P140000068787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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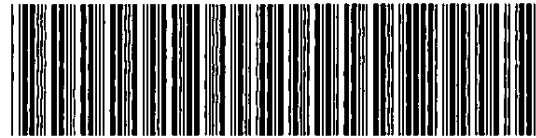
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/19/14--01001--015 **78.75

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2014 AUG 18 AM 3:49
NOTED
TO ADOPTED
SUFFICIENCY OF FILING

FILED
14 AUG 18 AM 8:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/19/14

COVER LETTER

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

SUBJECT: ASL Services Latino, Inc. (PR)
(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: Tina
Sunshine Corporate & Filing
Services, Inc.
3458 Lakeshore Drive
Tallahassee, FL 32312
Address
City, State & Zip
850 508-1891
Daytime Telephone number
julian@aslservices.com
E-mail address: (to be used for future annual report notification)

I will
pick up

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

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ARTICLE I NAME

The name of the corporation shall be: ASL Services Latino, Inc. (PR)

ARTICLE II PRINCIPAL OFFICE

Principal street address

3700 Commerce Blvd., Ste. #216

Kissimmee, FL 34741

Mailing address, if different is:

(Same)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To engage in any lawful activity. Furthermore,
this corporation will provide interpretation services to the deaf and hard of hearing
communities as well as the deaf-blind community through the usage of American
Sign Language to both the private and public sectors.

ARTICLE IV SHARES

The number of shares of stock is: 5,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Angela M. Roth, CEO/President

Address: 1592 Compass Court
Kissimmee, FL 34744

Name and Title: Vannessa C. LeBoss, VP

Address: 1596 Compass Court
Kissimmee, FL 34744

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

(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: Registered Agent Solutions, Inc.
Address: 155 Office Plaza Drive, Ste. A
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Angela M. Roth
Address: 1592 Compass Court
Kissimmee, FL 34744

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

Jaelyn V. Light Asst. Secretary 08/18/2014
Required Signature/Registered Agent 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.817.133, F.S.

Angela Roth 08/15/2014
Required Signature/Incorporator Date

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