

P14000079745

(Requestor's Name)

(Address)

(Address)

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☐ PICK-UP

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(Business Entity Name)

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DIVISION OF REVENUE
CLERK

SEP 26 2014

T. SCOTT

COVER LETTER

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

SUBJECT: Virtual Assist., 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: Shereen Gayle

Name (Printed or typed)

5530 SW 10th Ct.

Address

Margate, FL 33068

City, State & Zip

954-600-4979

Daytime Telephone number

Ms.Shereen@gmail.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: Virtual Assist., Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address

Mailing address, if different is:

5530 SW 10th Ct.

Margate, FL 33068

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: to start a business entity

ARTICLE IV SHARES 1
The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Shereen Gayle

Name and Title: Owner/CEO

Address: 5530 SW 10th Ct.

Address: _____

Margate, FL 33068

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

Name and Title: _____

Name and Title: _____

Address: _____

Address: _____

SEP 25 PM 2:46

CLERK OF DISTRICT COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
IN FLORIDA

(conti.)

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: Shereen Gayle

Address: 5530 SW 10th Ct.

Margate, FL 33068

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Shereen Gayle

Address: 5530 SW 10th Ct.

Margate, FL 33068

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

Shereen Gayle
Required Signature/Registered Agent

9-17-2014

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.

Shereen Gayle
Required Signature/Incorporator

9-17-2014

Date

14 SEP 25 PM 2:46
RECEIVED
STATE DEPT OF STATE
TALLAHASSEE, FLORIDA