

P14000095836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



WAIT

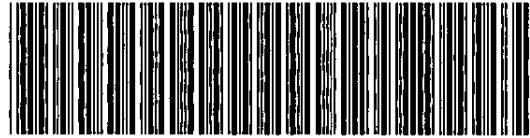
MAI

(Business Entity Name)

(Document Number)

Special Instructions to Filing Officer:

Office Use Only



100266819641

11/25/14--01004--023 **78.75

APPROVED
AND
FILED

14 NOV 25 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/4

COVER LETTER

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

SUBJECT: Resto Solutions, 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: Victor Resto

Name (Printed or typed)

4714 N. Havana Apt. 2714

Address

Tampa, FL 33614

City, State & Zip

(813) 428-2902

Daytime Telephone number

cyber1501@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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be: Resto Solutions, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

14 NOV 25 PM 1:47

Mailing address, if different is:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4714 N. Havana Apt. 2714

Tampa, FL 33614

4714 N. Havana Apt. 2714

Tampa, FL 33614

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: online products and services

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Victor Resto, Directo

Name and Title: _____

Address 4714 N. Havana Apt. 2714

Address: _____

Tampa, FL 33614

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

APPROVED (cont.)
AND
FILED

Name and Title: _____ Name and Title: 14 NOV 25 PM 1:47
Address: _____ Address: SECRETARY OF STATE

_____ TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: Victor Resto
Address: 4714 N. Havana Apt. 2714
Tampa, FL 33614

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Victor Resto
Address: 4714 N. Havana Apt. 2714
Tampa, FL 33614

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

Victor Resto
Required Signature/Registered Agent

11/19/2014
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.

Victor Resto
Required Signature/Incorporator

11/19/2014
Date