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☐ PICK-UP

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(Business Entity Name)

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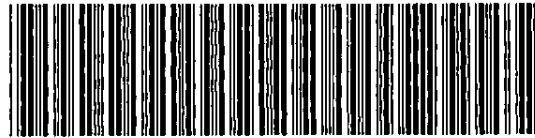
Certified Copies _____ Certificates of Status _____

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T. SCOTT



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15 JAN 22 PM 4:39
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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 1/22/15

NAME: VONALITY GLOBAL SERVICES INC

TYPE OF FILING: ARTICLES

COST: 78.75

RETURN: CERTIFIED COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Abbie Hodge



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 23, 2015

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: VONALITY GLOBAL SERVICES INC.
Ref. Number: W15000004785

We have received your document for VONALITY GLOBAL SERVICES INC. and the authorization to debit your account in the amount of \$78.75. However, the document has not been filed and is being returned for the following:

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 615A00001381

*please keep
original file
date. Thanks!*

RECEIVED
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DIVISION OF CORPORATIONS
15 JAN 26 PM 12:06
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SUFFICIENCY OF FILING

COVER LETTER

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

SUBJECT: VONALITY GLOBAL 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
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: CAPITOL SERVICES - CORPORATE FILINGS TEAM
Name (Printed or typed)

800 BRAZOS STE 400
Address

AUSTIN TX 78701
City, State & Zip

(800) 345-4647
Daytime Telephone number

JOSH@VONALITY.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: VONALITY GLOBAL SERVICES INC.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

1500 AVENUE ROAD, SUITE 1348

TORONTO, ONTARIO, M5M 3X2

CANADA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TO ENGAGE IN THE CONDUCT OF COMMERCIAL BUSINESS ACTIVITIES

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSH GOLD - President/Director Name and Title: _____

Address 1500 AVENUE ROAD, SUITE 1348 Address: _____

TORONTO, ONTARIO, M5M 3X2

CANADA

Name and Title: RONA GOLD - Secretary/Director Name and Title: _____

Address 1500 AVENUE ROAD, SUITE 1348 Address: _____

TORONTO, ONTARIO, M5M 3X2

CANADA

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

15 JAN 22 AM 9:10

(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: RONA GOLD

Address: 2030 S. OCEAN DRIVE, SUITE 2101

HALLANDALE, FL 33009

ARTICLE VII INCORPORATOR

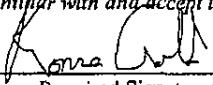
The name and address of the Incorporator is:

Name: JOSH GOLD

Address: 1500 AVENUE ROAD, SUITE 1348

TORONTO, ONTARIO, M5M 3X2, CANADA

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

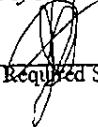


Required Signature/Registered Agent

 Jan 22, 2015

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

 Jan 22, 2015

Date

15 JAN 22 AM 9:10

RECEIVED
JAN 22 2015
STATE OF FLORIDA
DEPARTMENT OF STATE