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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2/19/15

COVER LETTER

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

SUBJECT: SOUTH WEST FLORIDA VACATIONS

(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: EDUARDO DEL CORRAL

Name (Printed or typed)

10300 49th Street, N. Suite #424

Address

Clearwater, Florida 33762

City, State & Zip

8325373040

Daytime Telephone number

eduardodelcorral@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: SOUTH WEST FLORIDA VACATIONS, INC.

ARTICLE II PRINCIPAL OFFICE
Principal street address Mailing address, if different is:
10300 49th Street, N. Suite #424
Clearwater, Florida 33762

ARTICLE III PURPOSE
The purpose for which the corporation is organized is: Destination Management Services

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Eduardo Del Corral - CEO</u>	Name and Title:	_____
Address	<u>10300 49th Street, N. Suite #424</u>	Address:	_____
	<u>Clearwater, Florida 33762</u>		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

Name and Title:	_____	Name and Title:	_____
Address	_____	Address:	_____
	_____		_____

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TALLAHASSEE, 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:

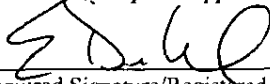
Name: Eduardo Del Corral
Address: 10300 49th Street, N. Suite #424
Clearwater, Florida 33762

ARTICLE VII INCORPORATOR

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

Name: Eduardo Del Corral
Address: 10300 49th Street, N. Suite #424
Clearwater, Florida 33762

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

2/6/2015
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

2/6/2015
Date