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ALL AMASST FLORIDA

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COVER LETTER

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

SUBJECT: **VONK CO**

(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: **BARBARA Z SOTO**

Name (Printed or typed)

340 W FLAGER ST # 3008

Address

MIAMI , FL 33130

City, State & Zip

954-245-1031

Daytime Telephone number

info@vonkco.com

E-mail address: (to be used for future annual report notification)

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

03
FEBRUARY 24, 2015
MIAMI, FL ORIDA

VONK CO
340 W FLAGLER ST # 3008
MIAMI, FL 33130
DOCUMENT No. P12000062934


15 MAR -2 AM 11:45
SECRETARY OF STATE
MIAMI, FLORIDA

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

I AM BARBARA Z SOTO PRESIDENT OF VONK CO DOCUMENT NUMBER P12000062934
I WOULD LIKE TO INFORM YOUR DEPARTMENT THAT I WILL NOT CLAIM ANY REINSTATEMENT
FILING FOR MY CORPORATION VONK CO. AND I WOULD LIKE TO OPEN A NEW CORPORATION
WITH THE SAME NAME OF VONK CO. ATTACHED ARE THE ARTICLES OF INCORPORATION AND
THE FEE FOR THE NEW CORPORATION.

I AM THANKING YOU IN ADVANCE FOR YOUR COOPERATION ON THIS MATTER.

SINCERELY YOURS,



BARBARA Z SOTO

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: VONK CO

ARTICLE II PRINCIPAL OFFICE

Principal street address

340 W FLAGLER ST # 3008

MIAMI, FL 33130

Mailing address, if different is:

340 W FLAGLER ST # 3008

MIAMI, FL 33130

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: CONCIERGE CONSULTING

ARTICLE IV SHARES

The number of shares of stock is: 100 AT \$1.00

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: BARBARA SOTO

Address 340 W FLAGLER ST # 3008

MIAMI, FL 33130

Name and Title: _____

Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ 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: BARBARA SOTO
Address: 340 W FLAGLER ST # 3008
MIAMI, FL 33130

15 MAR -2 AM 11:45
RECEIVED
TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: BARBARA SOTO
Address: 340 W FLAGLER ST # 3008
MIAMI, FL 33130

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

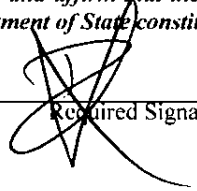


Required Signature/Registered Agent

02/24/2015

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

02/24/2015

Date