

P15000031306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

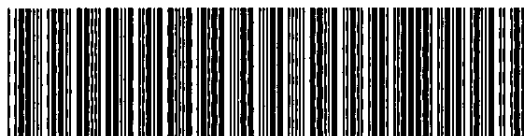
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Use Only



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02/17/15--01020--011 **87.50

FILED
15 APR -2 PM 3:12
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: _____
(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: Vom Hainland, Incorporated
Name (Printed or typed)

7240 Redwing Road
Address

GROVELAND FL 34736
City, State & Zip

352-267-7775
Daytime Telephone number

Hainland@aol.com
E-mail address: (to be used for future annual report notification)

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

A

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: VOM Hainland, Incorporated

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

7240 Redwing Road
GROVELAND, FL 34736

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To conduct business in
Lake County, Florida. Specifically, start an
olive farm. Also, venture into portable toilets
agriculturally constructed on trailers.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Amanda Hoskinson, P Name and Title: _____

Address 7240 Redwing Rd Address: _____
GROVELAND, FL 34736

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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15 APR -2 PM 3:18
SEAL
STATE
PALM BEACH, 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: AMANDA HOSKINSON

Address: 7240 REDWING ROAD
GROVELAND FL 34736

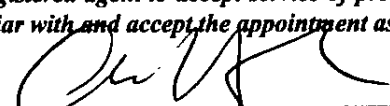
ARTICLE VII INCORPORATOR

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

Name: AMANDA HOSKINSON

Address: 7240 REDWING RD
GROVELAND FL 34736

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

2/13/15
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

2/13/15
Date

FILED
15 APR -2 PM 3:13
STATE OF FLORIDA
TALLAHASSEE



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
15 APR -2 PM 10:27
TALLAHASSEE, FLORIDA

February 19, 2015

AMANDA HOSKINSON
7240 REDWING ROAD
GROVELAND, FL 34736

SUBJECT: VOM HAINLAND
Ref. Number: W15000012268

We have received your document for VOM HAINLAND and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

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.

Christine Haney
Regulatory Specialist II
New Filing Section

Letter Number: 615A00003539

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15 APR -2 PM 3:13
TALLAHASSEE, FLORIDA