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☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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APR 13 2015

T. SCOTT



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ATTORNEYS CORPORATION SERVICE, INC.  
5668 EAST 61<sup>ST</sup> STREET  
COMMERCE, CA 90040  
TEL: (800) 462-5487 ext.102 FAX: (800) 388-0330  
EMAIL: jenny@attorneyscorpsservice.com

DOCUMENT FILING REQUEST LETTER

REGULAR FILING SERVICE

DATE: Wednesday, April 01, 2015

FROM: JENNY CHACON

Client Matter: # 9015635-5454408

TO: Department of State  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

ATTN: DOCUMENT FILING DIVISION

RE: **Blue Rock Ventures, Inc.**

Enclosed is one of the following: (X) Articles of Incorporation

Return request with filing: (1) Certified Endorsed Copy

Return request via following: (X) Priority Mail/Email

Total Page(s) attached including transmittal page: (3)

**\*\*Fax/Email a copy of the filed documents upon acceptance of filing\*\***

**\*\*PLEASE RETURN FILED DOCUMENTS ATTACHED WITH AN INVOICE TO:  
ATTORNEYS CORPORATION SERVICE, INC.  
5668 EAST 61<sup>ST</sup> STREET, COMMERCE, CA 90040\*\***

**\*\*PLEASE CONFIRM UPON RECEIVED DOCUMENTS\*\***

NOTE(S): CHECK# 780683 \$87.50 (FILING FEE)

**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: Blue Rock Ventures, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8369 NW 66 St., #A3000

Miami, FL 33166

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Consulting

**ARTICLE IV SHARES**

The number of shares of stock is: 100,000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Erica L. Zajac, Pres, Sec, Treas

Address 8369 NW 66 St., #A3000  
Miami, FL 33166

Name and Title: Adam G. Zajac, Vice Pres

Address: 8369 NW 66 St., #A3000  
Miami, FL 33166

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

15 APR - 6 PM 1:50

(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: Gautham Pillappa

Address: 5731 Bassett Place  
Sanford, FL 32771

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Erica L. Zajac

Address: 8369 NW 66 St., #A3000  
Miami, FL 33166

*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*

Gautham Pillappa  
Required Signature/Registered Agent

3/31/2015  
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.*

Erica Zajac  
Required Signature/Incorporator

3/31/2015  
Date