

915000067051

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 AUG -7 PM 1:17

8/11/15 CR

COVER LETTER

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

SUBJECT: O & L Inc ↔ Ol & SO 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: Olger Solis Sr.
Name (Printed or typed)

3600 Seminole Avenue
Address

Naples, FL 34112
City, State & Zip

239-228-9807
Daytime Telephone number

olgers@msn.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: OL & SO Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
3600 Seminole Avenue
Naples, FL 34112

Mailing address, if different is:
3600 Seminole Avenue
Naples, FL 34112

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS.

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ARTICLE IV SHARES

The number of shares of stock is: 10,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Olger Solis Sr., President, Secretary</u>	Name and Title:	<u>Lourdes Solis, Vice President</u>
Address	<u>3600 Seminole Avenue</u>	Address:	<u>3600 Seminole Avenue</u>
	<u>Naples, FL 34112</u>		<u>Naples, FL 34112</u>

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

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

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: Olger Solis Sr.

Address: 3600 Seminole Avenue

Naples, FL 34112

ARTICLE VII INCORPORATOR

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

Name: Olger Solis Sr.

Address: 3600 Seminole Avenue

Naples, FL 34112

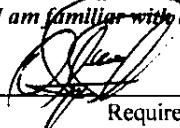
ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

07/06/2015

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

07/06/2015

Date



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 28, 2015

OLGER SOLIS SR
3600 SEMINOLE AVENUE
NAPLES, FL 34112

SUBJECT: O & L INC
Ref. Number: W15000050780

We have received your document for O & L INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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: 615A00015787