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12/02/15

COVER LETTER

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

SUBJECT: SOFLA FACILITIES CORPORATION

(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: DEAN RAMSARRAN

Name (Printed or typed)

1284 OLYMPIC CIRCLE

Address

GREENACRES, FL, 33413

City, State & Zip

561-294-7760

Daytime Telephone number

SOLDBYDEAN@AOL.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: SOFLA FACILITIES CORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1284 OLYMPIC CIRCLE

GREENACRES

FL-33413

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: facilities management & maintenance

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Dean Ramsarran (Director)

Name and Title: _____

Address 1284 Olympic Circle

Address: _____

Greenacres, FL

33413

Name and Title: Abby Ramsarran (principal officer)

Name and Title: _____

Address 1284 Olympic Circle

Address: _____

Greenacres, FL

33413

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

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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: Dean Ramsarran
 Address: 1284 Olympic Circle, Greenacres
FL,33413

ARTICLE VII INCORPORATOR

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

Name: Dean Ramsarran
 Address: 1284 Olympic Circle, Greenacres
FL,33413

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

Dean Ramsarran

Digitally signed by Dean Ramsarran
 DN: cn=Dean Ramsarran, o, ou, email=deanram@prohandyman.com, c=US
 Date: 2015.11.18 12:26:18 -0500

11/18/2015

Required Signature/Registered Agent

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.

Dean Ramsarran

Digitally signed by Dean Ramsarran
 DN: cn=Dean Ramsarran, o, ou, email=deanram@prohandyman.com, c=US
 Date: 2015.11.18 12:26:44 -0500

11/18/2015

Required Signature/Incorporator

Date

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