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PICK-UP WAIT MAIL

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. Gulligan FEB 15 2016

COVER LETTER

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

SUBJECT: ORCHID USA 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 Filing Fee
 \$78.75 Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: ALBA CHINCHILLA, IRIS PORTILLO, DEASY PORTILLO
Name (Printed or typed)

2605 WERRY FORD RD
Address

ORLANDO FL 32806
City, State & Zip

(407) 956-9278
Daytime Telephone number

gigiandrea2010@gmail.com
E-mail address: (to be used for future annual report notification)

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

FILED

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:

ORCHID USA CORPORATION

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2605 CURRY FORD RD
ORLANDO FL 32806

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: ALBA CHINCHILLA - PRESIDENT Name and Title:

Address: 2605 CURRY FORD RD Address:
ORLANDO FL 32806

Name and Title: IRIS PORTILLO - VICE-PRESIDENT Name and Title:

Address: 2605 CURRY FORD RD Address:
ORLANDO FL 32806

Name and Title: DEASY PORTILLO - VICE-PRESIDENT Name and Title:

Address: 2605 CURRY FORD RD Address:
ORLANDO FL 32806

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: ALBA CHINCHILLA
Address: 2605 CURRY FORD RD
ORLANDO FL 32806

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ARTICLE VII INCORPORATOR

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

Name: ALBA CHINCHILLA
Address: 2605 CURRY FORD RD
ORLANDO FL 32806

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 01/11/2016 (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

Alba Chinchilla

Required Signature/Registered Agent

01/28/16

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.

Alba Chinchilla

Required Signature/Incorporator

01/28/16

Date