Electronic Filing Cover Sheet

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(((H16000067740 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : BATCHELOR GROUP, GLOBAL FINANCIAL SERVICES CORP

Account Number : I20150000122

: (786)218-4201

Fax Number

: (305)824-8858

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA PROFIT/NON PROFIT CORPORATION POLO REMODELING CORP

Certificate of Status 0 Certified Copy Page Count 01 \$70.00 Estimated Charge

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Corporate Filing Menu

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Help

COVER LETTER

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

SUBJECT:	(PROPOSED CORPORA	TE NAME – MUST INCL	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
■ \$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Pec & Certified Copy	& Certificate of Status
		ADDITIONAL CO	PY REQUIRED
FROM: PO	LO REMODELING CORP	e (Printed or typed)	
221	5 NW 4 ST		
		Address	
MI.	AMI, FL 33135	N 8 72	
	_	, State & Zip	
(78	6) 970-2403 Davtime	Telephone number	
olog	oyordanys@yahoo.com		
<u></u>	E-mail address: (to be use	ed for future annual report	notification)

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

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Name and Title:		Name and Title:	
Addres	s	Address:	
	•		
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT accepta	ble) of the registered event is:	
Name:	YORDANYS POLO		
Address:	2215 NW 4 ST		
Aumess.	MIAMI, FL 33135	_	
<u>ARTICLE VII</u>	INCORPORATOR		
The name and s	address of the Incorporator is:		
Name:	YORDANYS POLO		
Address:	2215 NW 4 ST		
	MIAMI, FL 33135		
Effective date, i		. (OPTIONAL) cannot be more than five business days prior or 90 busines	:45
Note: If the day	 -	icable statutory filing requirements, this date will not be listed ords.	eg b
		rocess for the above stated corporation at the place designat as registered agent and agree to act in this capacity	ed in
	a later	03/16/2016	
	Adquired Signature/Registered Age	nt Date	
I submit this do document to the	ocument and affirm that the facts stated here t Department of State constitutes a third degre	n are true. I am aware that the false information submitted efelony as provided for in s.817.155, F.S.	in a
c/	Y	03/16/2016	
	uired Signature/Incorporator	Date	