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COVER LETTER

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

SUBJECT: FIELD SAMBUD TAX & ACCOUNTING SERVICES, 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 ☐ \$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: FIDEL M. NAVARROZA

Name (Printed or typed)

18002 ALLISON PARK PLACE, UNIT 201

Address

TAMPA, FL 33647

City, State & Zip

224-848-9988

Daytime Telephone number

fidel@fstaxandaccounting.com

E-mail address: (to be used for future annual report notification)

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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: FIELD SAMBUD TAX AND ACCOUNTING SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
18002 Allison Park Place, Unit 201

Tampa, FL 33647

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: a. Prepare individual, partnership, and corporation income tax returns,
b. bookkeeping and accounting services. c. payroll services, and d) application for individual tax identification.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Fidel Navarroza - President

Address 18002 Allison Park Place, Unit 201
Tampa, FL 33647

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

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: Fidel Navarroza
Address: 18002 Allison Park Place, Unit 201
Tampa, FL 33647

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ARTICLE VII INCORPORATOR

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

Name: Fidel Navarroza
Address: 18002 Allison Park Place, Unit 201
Tampa, FL 33647

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: May 17, 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

Required Signature/Registered Agent
5/17/16
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.

Required Signature/Incorporator
5/17/16
Date