

PL6000056093

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

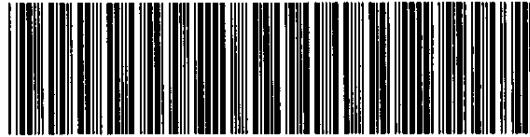
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400287349664

06/29/16--01007--009 **78.75

FILED
JUN 29 2016
FBI - NEW YORK

16 JUN 29 AM 7:54

FILED

COVER LETTER

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

SUBJECT: YDI -Development 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: Melissa Serrano, YDI Inc

Name (Printed or typed)

4334 US Highway 441 SE Unit 4

Address

Okeechobee FL 34974

City, State & Zip

8636979504

Daytime Telephone number

melnmisa@hotmail.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: YDI - Development Services Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address
4334 US Highway 441 SE Unit 4
Okeechobee FL 34974

Mailing address, if different is:
PO Box 950853
Lake Mary, FL 32795

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

The purpose for which the corporation is organized is to conduct any and all lawful business for which corporations can be organized pursuant to Florida statute, including but not limited to the development of software, the sale of software, and the sale of software maintenance services.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Melissa Serrano, President & Secretary

Address 4334 US Highway 441 SE Unit 4
Okeechobee FL 34974

Name and Title: Misael Serrano, VP & Treasurer

Address: 4334 US Highway 441 SE Unit 4
Okeechobee FL 34974

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

FILED
16 JUN 29 6 AM 7:51
CLERK OF COURT
JANET L. HARRIS
CLERK OF COURT

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: Melissa Serrano

Address: 4334 US Highway 441 SE Unit 4

Okeechobee FL 34974

ARTICLE VII INCORPORATOR

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

Name: Melissa Serrano

Address: 4334 US Highway 441 SE Unit 4

Okeechobee FL 34974

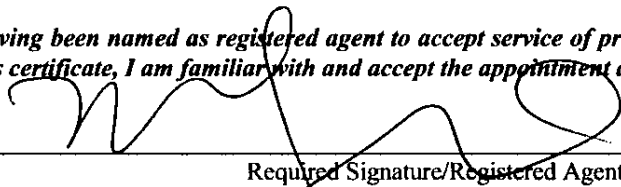
ARTICLE VIII EFFECTIVE DATE:

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

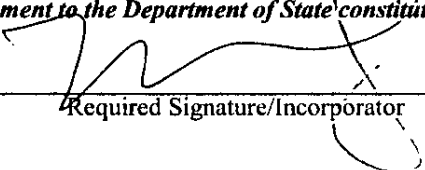


Required Signature/Registered Agent

06/25/2016

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

06/25/2016

Date