

P/60000845/4

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

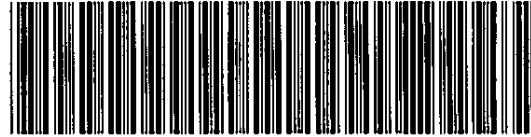
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATE AFFAIRS
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W/6-061103

10/20/16



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 7, 2016

ZULMA CHAVEZ
13535 PITANGA ST.
CLERMONT, FL 34711

SUBJECT: ZOLO TOUCH IMAGES, INC.
Ref. Number: W16000061103

We have received your document for ZOLO TOUCH IMAGES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

A corporation may not serve as its own incorporator. Please designate the individual whose typed signature appears on the signature line.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 516A00018787

COVER LETTER

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

SUBJECT: Zolo Touch Images 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
Filing Fee

☒ \$78.75
Filing Fee
& Certificate of Status

☐ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

FROM: Zulma G. Chavez
Name (Printed or typed)

13535 Pitanga St
Address

Clermont, Florida 34711
City, State & Zip

407-227-5723-
Daytime Telephone number

Zjchavez@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: Zolo Touch Images, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
13535 Pitanga St
Clermont, FL 34711

Mailing address, if different is:

13535 Pitanga St
Clermont, FL 34711

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: _____

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ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Zulma Chavez Name and Title: President

Address: 13535 Pitanga St Address: _____
Clermont, FL 34711

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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: Zulma Chavez
Address: 13535 Pitanga St
Clermont, FL 34711

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Zulma Chavez
Address: 13535 Pitanga St
Clermont, FL 34711

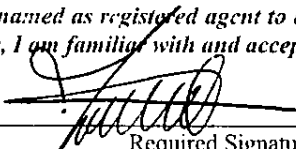
ARTICLE VIII EFFECTIVE DATE:

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

8/26/2016
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

8/26/2016
Date

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