

P16000091376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

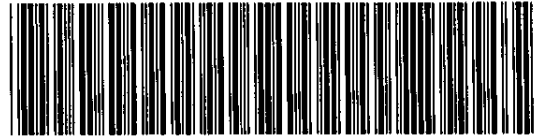
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800291976158

11/14/16--01028--029 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 NOV 14 PM 2:15

[Handwritten signature] 11/16/16

COVER LETTER

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

SUBJECT: Vass Aviation Seats & Services Co.

(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: Peter Vassel

Name (Printed or typed)

6225 Island Way

Address

Margate, FL 33063

City, State & Zip

954-649-9369

Daytime Telephone number

vassjam@yahoo.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: Vass Aviation Seats & Services Co.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

198 NE 186th Terrace

Miami, FL 33179

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to repair, service, and sale of aviation seats and parts.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

Name and Title: _____ Name and Title: _____

Address _____ Address: _____

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE & FINANCIAL SERVICES
2016 NOV 14 PM 2:15

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: Peter Vassel
Address: 6225 Island Way
Margate, FL 33063

ARTICLE VII INCORPORATOR

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

Name: Peter Vassel
Address: 6225 Island Way
Margate, FL 33063

FILED
SECRETARY OF STATE
DIVISION OF CORPORATE REGISTRATION
2016 NOV 11 PM 2:15

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 days prior or 90 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

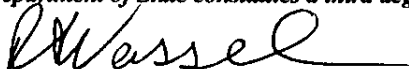


Required Signature/Registered Agent

11/10/2016

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

11/10/2016

Date