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2017 JAN 31 AM 9:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

V HERRING
FEB -1 2017

COVER LETTER

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

SUBJECT: UNITED CAKES OF AMERICA, 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:

Andreia Pedroso

Name (Printed or typed)

6911 Sorrento St.

Address

Orlando, FL 32819

City, State & Zip

(407) 729-0798

Daytime Telephone number

Andreia.pedroso@UCOFAMERICA.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: UNITED CAKES OF AMERICA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

6911 Sorrento St.

Orlando, FL 32819

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MAILING ADDRESS, IF DIFFERENT IS: STATE
FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: The transaction of any and all lawful businesses for which corporations may be incorporated under the Florida Business Corporation Act.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Andreia Pedroso, President

Name and Title: _____

Address 6911 Sorrento St.

Address: _____

Orlando, FL 32819

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Andreia Pedroso _____

Address: 6911 Sorrento St. _____

Orlando, FL 32819 _____

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Andreia Pedroso _____

Address: 6911 Sorrento St. _____

Orlando, FL 32819 _____

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

01/25/2017

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

01/25/2017

Date