

P18 www 48195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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MAY 29 2018

T. SCOTT



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05/18/18--01016--003 **25.00

FILED
2018 MAY 18 AM 9:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: UNIQUE Remodeling 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

<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
ADDITIONAL COPY REQUIRED	

FROM: FREDDY SAMIR PRIETO
Name (Printed or typed)

519 FLOWER FIELDS LN
Address

ORLANDO, FL 32824
City, State & Zip

407-761-6376
Daytime Telephone number

UNIQUE Remodeling Services@gmail.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: UNIQUE REMODELING SERVICES, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

519 FLOWER FIELDS LN
ORLANDO, FL 32824

519 FLOWER FIELDS LN
ORLANDO, FL 32824

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY & ALL LEGAL BUSINESS.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: FREDDY SAMIR PRIETO (PRESIDENT)

Address

Name and Title:

Address:

Name and Title:

Address

Address:

Name and Title:

Address

Address:

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TALLAHASSEE, FLORIDA

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: FREDDY SAMIR PRIETO
Address: 519 Flower Fields LN
ORLANDO, FL 32824

ARTICLE VII INCORPORATOR

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

Name: FREDDY SAMIR PRIETO
Address: 519 Flower Fields LN
ORLANDO, FL 32824


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 5/16/2018. (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

5/16/2018
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

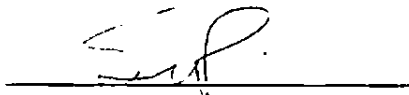
5/16/2018
Date

NOTICE OF INTENT NOT TO REINSTATE AND AUTHORIZATION TO RELEASE OF BUSINESS NAME

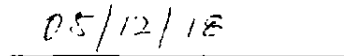
I Freddy Samir Prieto, do hereby confirm and state, that I will not be filing for reinstatement of the business name of UNIQUE REMODELING SERVICES, INC with DOCUMENT NUMBER (P11000045902).

I hereby authorize and request, that the business name of UNIQUE REMODELING SERVICES, INC, be released to FREDDY SAMIR PRIETO, for his intended business use after this name has been registered with the Florida Division of Corporations, and has received a new Document Number from the Florida Division of Corporations.

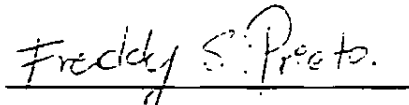
As identification, I have included a copy of my Florida Drivers License.



Freddy Samir Prieto (Signature)



Date of Signature



Freddy Samir Prieto (Printed Name)