P19000004268

(Re	questor's Name)	
(Ad	dress)	
(Ád	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
- -		

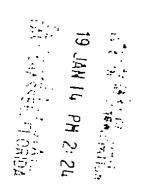
Office Use Only

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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 3, 2019

MARIA E RUIZ 7750 SW 117TH AVE, STE 201D MIAMI, FL 33183

SUBJECT: V & A DELIVERY SERVICES

Ref. Number: W19000000413

We have received your document for V & A DELIVERY SERVICES and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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

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

Please return 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.

Keyna E Page Regulatory Specialist II

Letter Number: 519A0000080

12/01/18

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

Re: V & A Delivery Services Inc

To Whom It May Concern:

By means of this letter I am advising that I have no intentions of re-instating the above mentioned dissolved corporation.

Should you have any questions or concerns please do not hesitate to contact me.

Sincerely,

Victor M. Acevedo Gonzalez

Vita Il And



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COVER LETTER

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

305-595-2407

MARIAQUIROS9@HOTMAIL.COM

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SUBJECT: V &	A DELIVERY SERVICES , Toc.			
	(PROPOSED CORPOR	ATE NAME – MUST INCL	UDE SUFFIX)	
Enclosed are an o	original and one (1) copy of the ar	ticles of incorporation and	d a check for:	
\$70.00 Filing Fee		□ \$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy	
		ADDITIONAL CO	& Certificate of Status OPY REQUIRED	
FROM:	MARIA E. RUIZ			
	Nam	e (Printed or typed)		
7	7750 SW 117TH AVE SUITE 201D			
-	Address			
1	MIAMI FL 33183			
_	City	. State & Zip		

NOTE: Please provide the original and one copy of the articles.

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

<u>CLE II PRIN</u>	<u>CIPAL OF FICE</u>		
UPERIOR ST	Principal street address	7750 SW	Mailing address, if different is: // 117TH AVENUE SUITE 201D
TONA FL 32725			FL 33183
			
CLE III PURF urpose for which	· 	D ALL LEGAL PU	RPOSES
		· · · · · · · · · · · · · · · · · · ·	
		 	
CLE IV SHAR	ES 100 @ 1 00 FA		
CLE IV SHAR Imber of shares of	ES 100 @ 1.00 EA		
	ES 100 @ 1.00 EA stock is: AL OFFICERS AND/OR DIRECTORS		
CLE V INITI		.	:
CLE V INITI	AL OFFICERS AND/OR DIRECTORS) Name and Title	:
CLE V INITE. Name and Title	AL OFFICERS AND/OR DIRECTORS VICTOR M ACEVEDO (PRESIDENT) 888 SUPERIOR ST) Name and Title	
CLE V INITE. Name and Title	AL OFFICERS AND/OR DIRECTORS VICTOR M ACEVEDO (PRESIDENT 888 SUPERIOR ST) Name and Title	
Name and Tith Address	AL OFFICERS AND/OR DIRECTORS VICTOR M ACEVEDO (PRESIDENT 888 SUPERIOR ST DELTONA FL 32725) Name and Title Address:	
Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTORS VICTOR M ACEVEDO (PRESIDENT) 888 SUPERIOR ST DELTONA FL 32725) Name and Title Address: Name and Title	
Name and Tith Address	AL OFFICERS AND/OR DIRECTORS VICTOR M ACEVEDO (PRESIDENT 888 SUPERIOR ST DELTONA FL 32725) Name and Title Address: Name and Title	
Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTORS VICTOR M ACEVEDO (PRESIDENT) 888 SUPERIOR ST DELTONA FL 32725) Name and Title Address: Name and Title	19 J.W.
Name and Title Address Name and Title	AL OFFICERS AND/OR DIRECTORS VICTOR M ACEVEDO (PRESIDENT) 888 SUPERIOR ST DELTONA FL 32725) Name and Title Address: Name and Title	
Name and Title Address Name and Title Address	AL OFFICERS AND/OR DIRECTORS VICTOR M ACEVEDO (PRESIDENT) 888 SUPERIOR ST DELTONA FL 32725	Name and Title Address: Name and Title Address: Address: Address:	19 JW 14 PH 2:

Name and Title: VICTOR M. ACEVEDO Name and Title: President Address: BBB superior St Deitona #132725	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Name: Victor M. Acevedo Address: BBB Supposers Le Hong H. 32725	
The name and address of the Incorporator is: Name: Victor M. Accuedo Address: 888 SUPPNOY St Deltono H 32775	
ARTICLE VIII EFFECTIVE DATE: Effective date, if other than the date of filing: (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 more than the 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 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 2.817.155, F.S.	

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