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(Requestor's Name)

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PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Number of Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

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DEC 28 2022

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COVER LETTER

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

SUBJECT: EUROWEST, 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

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

FROM: REBECCA L WILLIAMS, E.A.
Name (Printed or typed)

1650 SAND LAKE RD STE 115
Address

ORLANDO, FL. 32809
City, State & Zip

407-851-4037
Daytime Telephone number

REBECCA@BEESQUARETAX.COM
E-mail address: (to be used for future annual report notification)

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

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

EUROWEST, INC.

Signature

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

- _____ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____

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: EUROWEST, INC

ARTICLE II PRINCIPAL OFFICE

Principal street address
800 FORMOSA AVE
WINTER PARK, FL 32789

Mailing address, if different is:
800 FORMOSA AVE.
WINTER PARK, FL 32789

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOHN WASH PRESIDENT Name and Title: _____

Address 1224 W. HARVARD ST. Address: _____
ORLANDO, FL 32804 _____

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: BEE SQUARE TAX CONSULTATION AND SERVICE INC
 Address: 1650 SAND LAKE RD STE 115
ORLANDO, FL. 32809

ARTICLE VII INCORPORATOR

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

Name: REBECCA L WILLIAMS, E.A.
 Address: 1650 SAND LAKE RD STE 115
ORLANDO, FL. 32809

RECEIVED 12/27/22

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: JANUARY 1ST, 2023. (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

Rebecca L Williams E.A. 12-24-22
 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 s.817.155, F.S.

Rebecca L Williams, E.A. 12-24-22
 Required Signature/Incorporator Date