

PR2000064130

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

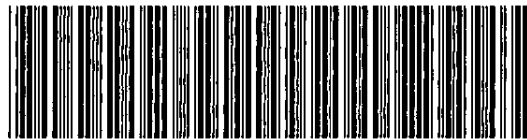
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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7/19/12 8:09 AM
STATE OF TEXAS
FELIXSON ST. JAMES, SAN ANTONIO

7/23

COVER LETTER

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

SUBJECT: ELEVS, 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: JUDY FIREK
Name (Printed or typed)

7415 ROXYE LANE
Address

SARASOTA, FL 34240
City, State & Zip

941-914-2830
Daytime Telephone number

JUDYFIREK@COMCAST.NET
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: ELEV8, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
5119 N TAMiami RD.
SARASOTA, FL 34232

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
SELLING NUTRITIONAL PRODUCTS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOE FIREK PRESIDENT Name and Title: _____
Address: 5119 N TAMiami RD Address: _____
SARASOTA, FL 34232

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: MICHAEL KILBRIDE
Address: 5119 N TAMiami RD
SARASOTA, FL 34232

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JUDY FIREK
Address: 7413 ROXYE LANE
SARASOTA, FL 34240

12 JUL 19 AM 8:09
SECRETARY OF STATE
DIVISION OF CORPORATIONS

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

Michael Kilbride
Required Signature/Registered Agent

7/13/12
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.

Judy Firek
Required Signature/Incorporator

7/13/2012
Date