## 713000017736

(Requestor's Name)			
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PICK-UP WAIT . MAIL			
(Business Entity Name)			
(Document Number)			
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02/22/13--01014--004 \*\*70.00



J. Shivers FEB 25 2013

## **COVER LETTER**

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

SUBJECT: THE SMARL Dynamics	Group inc
(PROPOSED CORPORA	ATE NAME – <u>MUST INCLUDE SUFFIX</u> )
Enclosed are an original and one (1) copy of the art	ticles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75  Filing Fee & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED
	ADDITIONAL COLT REQUIRED
FROM: Robert P. Barone	e (Printed or typed)
23750 Via Trevi Way Ap	ot # 2003
	Address
Bonita Springs, FL 341	34 State & Zip
239-948-0199	Clanbana numban
Daytime 1	elephone number
bbarone@inassoc.com	d 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

ARTICLE I	NAME The Smart Dynami	cs Group Inc	
The name of the	corporation shall be:	00 0,0 <b>u</b> p0	
ARTICLE II	PRINCIPAL OFFICE		
AR IICEE II	Principal street address	Mailing add	ress, if different is:
	23750 Via Trevi Way Apt # 2003		idress
	Bonita Springs , FL 34134	<del></del>	
ARTICLE III			
	which the corporation is organized is:		
Profit Corpo			
Internet Sal	es and Marketing		
ARTICLE IV	SHARES pares of stock is: 1000		
The number of si	lates of stock is. 1000		
	INITIAL OFFICERS AND/OR DIREC		
	Title: Robert P. Barone - President		
Address:	23750 Via Trevi Way Apt #2003	Address:	
	Bonita Springs, Fl. 34134	<del></del>	
	<u> </u>		
Name and	Title: Mary E. Barone - Vice Presider	ot Name and Title:	
Address:	23750 Via Trevi Way Apt # 200		
, Addiess.	Bonita Springs, FL 34134		
	Bollia Spilligs, 7 L 34 134		
		<del></del>	
	Title:	Name and Title:	
Address:		Address:	
ARTICLE VI	REGISTERED AGENT		(元)
	lorida street address (P.O. Box NOT acceptal	ble) of the registered agent is:	公司 22
Name:	Northwest Registered Agent.		iti _
Address:	3030 N. Rocky Point Dr. STE		# P # U
	Tampa, FL 33607		STA :
	• •		夏前 一
ARTICLE VII			- Of
	ddress of the Incorporator is:		
Name:	Robert Barone		
Address:	23750 Via Trevi Way Apt # 20	03	
	Bonita Springs, FL 34134	<del></del>	
Having heen nat	ned as registered agent to accept service of p	process for the above stated cornora	tion at the place designated in
this certificate. L	am familiar with and accept the appointment	as revistered avent and avree to act	in this capacity
بدكم	7/2		- / - /
M	Dar	n Keen-Manager	2/20/13
<del>-9/-/</del>	Required Signature/Registered Agen		Date
	Required Signature/Registered Agen	ıı	/ Duty
I submit this doc	cument and affirm that the facts stated herei	in are true. I am aware that the fa	lse information submitted in a
document to the	Department of State constitutes a third degree	felony as provided for in s.817.155,	F.S. ,
	1/1/1/1/1		2/01/12
	My Mund Required Signature/Incorporator		a/20/13
	Required Signature/Incorporator		Date/
$\nu$			, /