P20000078713

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☒ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W2- 113198

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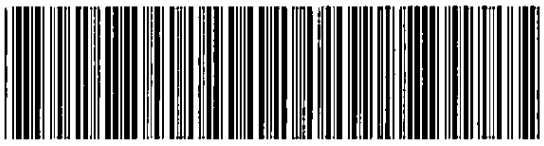

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2020 OCT -1 AM 11:21
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2020 OCT -9 AM 10:46
TALLAHASSEE, FLORIDA

M. CULLIGAN

OCT - 2020

FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 2, 2020

MARTINA ROGERS
4370 SHEREBORNE RD
TALLAHASSEE, FL 32303

SUBJECT: SMRT UNIVERSAL VENDING CORP
Ref. Number: W20000113198

We have received your document for SMRT UNIVERSAL VENDING CORP and your check(s) totaling $87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list at least one incorporator with a complete business street address.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.
Re: Document Number W20000113198

Having fulfilled the requirements of section 607.1520 or 617.1520, F.S., on October 2, 2020, this Certificate of Withdrawal is hereby issued to SMRT UNIVERSAL VENDING CORP, corporation, in accordance with said statute. The corporation may now withdraw from the state of Florida.

Your certification is enclosed.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

Neysa Culligan
Regulatory Specialist II
Division of Corporations

Letter Number: 820A00019034

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: SMRT UNIVERSAL VENDING Corp.
(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

☐ $78.75 Filing Fee & Certified Copy

☒ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: MARTINA ROGERS
Name (Printed or typed)

4370 SHEREBORNE RD
Address

TALLAHASSEE, FLORIDA 32303
City, State & Zip

850-294-0158
Daytime Telephone number

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

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: SMRT UNIVERSAL VENDING Corp.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address

4370 SHEREBORNE RD
TALLAHASSEE, FLORIDA 32303

Mailing address, if different is:

4370 SHEREBORNE RD
TALLAHASSEE, FLORIDA 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide vending services to various businesses with convenient and refreshing beverages and nutritious snacks.

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ARTICLE IV SHARES

The number of shares of stock is: 3

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SHONDREA THOMAS
Address: 339 WILSON GREEN BLVD.
TALLAHASSEE, FLORIDA 32305
850-491-6315

Name and Title: MARTINA ROGERS
Address: 4370 SHEREBORNE RD
TALLAHASSEE, FLORIDA 32303
850-294-0158

Name and Title: SHALOTTIE MOSLEY
Address: 2178 JEFFERSON RD S
TALLAHASSEE, FLORIDA 32317
850-321-8867

Name and Title:
Address:

Name and Title:
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: MARTINA ROGERS

Address: 4370 SHEREBORNE RD

TALLAHASSEE, FLORIDA 32303

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

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

Name: Martina Rogers

Address: 4370 Sherborne Rd

Tallahassee, Florida 32303

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____. (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

_____ 10/1/2020

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.

_____ 10/1/2020

Required Signature/Incorporator Date