P11000059554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SC
6-28-11

COVER LETTER

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

SUBJECT: Storage & Moving Management Services, 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
- ☐ $78.75 Filing Fee & Certified Copy
- ☐ $87.50 Filing Fee, Certified Copy & Certificate of Status

ADDITIONAL COPY REQUIRED

FROM: Julie Willford
Name (Printed or typed)

500 Minnie St.
Address

Titusville, FL 32796
City, State & Zip

(321) 269-3280
Daytime Telephone number

hdss@bellsouth.net
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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: Storage & Moving Management Services, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal **street** address
Storage and Moving Management Services, Inc.
500 Minnie St.
Titusville, FL 32796

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Supplying goods and services to the self-storage industry.

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Julie Willford, Manager
Address: 500 Minnie St.
Titusville, FL 32796

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

Name and Title:
Address:

ARTICLE VI REGISTERED AGENT
The **name and Florida street address** (P.O. Box **NOT** acceptable) of the registered agent is:
Name: Julie Willford
Address: 500 Minnie St
Titusville, FL 32796

ARTICLE VII INCORPORATOR
The **name and address** of the Incorporator is:
Name: Julie Willford
Address: 500 Minnie St
Titusville, FL 32796

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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

Julie Willford
Required Signature/Registered Agent
Julie Willford

June 21, 2011
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.

Julie Willford
Required Signature/Incorporator
Julie Willford

June 21, 2011
Date