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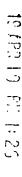


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04/10/19--01006--008 **210.

FILING CANCELLED
DUE TO RETURNED CHECK



COVER LETTER

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

FILING CANCELLED DUE TO RETURNED CHECK

SUBJECT: GO	DD-GEOUS 1	NC.	
	(PROPOSED CORPO	RATÉ NAME – <u>MUST INC</u>	CLUDE SUFFIX)
Enclosed is an original	and one (1) copy of the Artic	cles of Incorporation and	a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	□\$78.75 Filing Fee & Certified Copy	S87.50 Filing Fee, Certified Copy & Certificate
		ADDITIONAL CO	PY REQUIRED
FROM	La Cora Han	e (Printed or typed) Address	_
	Tailahasse	e Floricki 323 City, State & Zip	3°2
	.	ne Telephone number	_

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

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

FILING CANCELLED

The name of the corporation shall be:	DUE TO RETURNED CHECK
ARTICLE II PRINCIPAL OFFICE	
2344 Tuscavilla Road	Mailing address, if different is:
Tallahassee, Florida. 32312	Tayahasser, Florida 32302
ARTICLE III PURPOSE FULL	121
The purpose for which the corporation is organized is:	Planning & Consulting
	2019 A
	APR FILE
	PH CD
ARTICLE IV MANNER OF ELECTION The manner in which	the directors are elected and appointed:
Meeting and voting	<u> </u>
Name and Title: LOCOLO HOURS FOR LOCOLO Name and	Lawar Handsford Namaer
Address 1. C. Prev 61 Address	" 1,0 120x 101
Tallahasser, Fl 32302	Tallahasser, 12 32302
Name and Title: (hristopher Blevens Jr. President a	and Title: La Core 1 B. Levens Vice Presiden
Address Clarasser, to 32302	Jailahasseg Fl. 32302
Name and Title: LNIBer 1 Mitchell, Secretary	nd Title:
Address POBOX W Addres	
Tailalussee, 72 32362	

FILING CANCELLED DUE TO RETURNED CHECK

Name and Title:	DUE IO RE	Name and Title:		
Address		Address:		
Name and Title:		Name and Title:		
Address		Address:		* * * * * * * * * * * * * * * * * * * *
_				
ARTICLE VI R	EGISTERE <u>D AGENT</u>			
The name and Flo	rida street address (P.O. Box i	NOT acceptable) of the registered agent is:	+:, ~	
Name:	Jacopa train	astord 1		
Address:	23ch Tusc	avila Road	2019 APR 10	~r_
	Tallalasser,	tu 3231C	· 10	
ARTICLE VII	INCORPORATOR		FH 12: 0	O
	Iress of the Incorporator is:	1 10/	, 0	
Name:	La Cora +			
Address:	2344 Tus	carlla Kord		
	allahasser	1. 32312		20 50 50 50
ARTICLE VIII	EFFECTIVE DATE:	4.10-19		
Effective date, if of (1f an effective date)	other than the date of filing: ite is listed, the date must be	specific and cannot be more than five da	NAL) iys prior or 90 days after the fili	ing.)
Maria de la compansión de	to the state bloods also so and	and the analogable statutory filing requires	mante, this data will not be listed	ae the
	ive date on the Department of ξ	meet the applicable statutory filing requirer State's records.	mens, this date will not be fished t	45 the
Having-been nan	ned as registered agent to acce	ept service of process for the above stated	corporation at the place designation	ited in this
certificater l'am fe	imiliar with and accept the app	pointment as registered agent and agree to	,	7
	Required Signature of	Registered Agent	Date	_
I submit this docu	ment and affirm that the facts	stated herein are true. I am aware that an	y false information submitted in a	ı document
to the Departmen	of State constitutes if third deg	gree felony as provided for in s.817.155, F.,	4-10-19	
	Required Signatu	ure of Incorporator	Date	
	~ 1			

Page, Keyna

From:

LaCora & Company Inc.

Sent:

Wednesday, April 10, 2019 3:24 PM

To: Subject:

Page, Keyna

Businesses

EMAIL RECEIVED FROM EXTERNAL SOURCE

Hello Kenya, Thanks for being so great.

I'm just looking over the filing. May I have the EIN numbers added. FILING CANCELLED
DUE TO RETURNED CHECK

!

God-geous 82 3539073 Christopher name is spelled wrong Add the B. To Lewis B. Handsford LaCorey Levens is the correct last name spelling

Thanks LaCora

Sent from my iPhone