

TRANSMITTAL LETTER

P02000050315

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

400005415234--9
-05/01/02--01037--003
*****87.50 *****87.50

SUBJECT: 4 Square, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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: Lisa C Altman
Name (Printed or typed)

PO Box 93445
Address

Lakeland, FL. 33804-3445
City, State & Zip

863-667-9016
Daytime Telephone number

James
GAVE
AUTHORIZATION BY PHONE TO
CORRECT Stock
DATE 5-7-02
DCC. EXAM 20

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

FILED

02 MAY -1 AM 7:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

05-08-02
5

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:

4 Square, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2264 OLNEY RD.

Lakeland FL 33801

PO BOX 93445

Lakeland, FL 33804-3445

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

I am starting a new business and plan on expansion.

ARTICLE IV SHARES

The number of shares of stock is:

10

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Lisa C Altman, owner

James E Altman, president

Kathy A Hester, manager

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Lisa C Altman

2264 OLNEY ROAD

Lakeland, FLORIDA 33801

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lisa C Altman

2264 OLNEY ROAD

Lakeland, FLORIDA 33801

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

Lisa C Altman

Signature/Registered Agent

4-28-02

Date

Lisa C Altman

Signature/Incorporator

4-28-02

Date

FILED
02 MAY -1 AM 7:17
SECRETARY OF STATE
TALLAHASSEE FLORIDA