

PO3000009211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

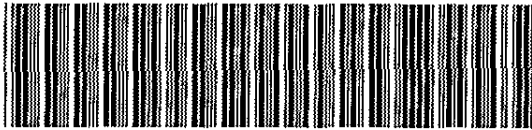
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03 JAN 17 AM 9:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: Solaris Direct 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: Marc Brannigan
Name (Printed or typed)

1819 Stonehaven Drive
Address

Boynton Beach, FL 33436
City, State & Zip

561-302-5274
Daytime Telephone number

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:

Solaris Direct Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1819 Stonehaven Drive
Boynton Beach, FL 33436

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

A professional for profit corporation, direct mail advertising and other direct marketing services.

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

ARTICLE VI REGISTERED AGENT

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

Marc Brannigan
1819 Stonehaven Drive
Boynton Beach, FL 33436

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Marc Brannigan
1819 Stonehaven Drive
Boynton Beach, FL 33436

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

Signature/Registered Agent

Date

Signature/Incorporator

Date

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TALLAHASSEE FLORIDA