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TRANSMITTAL LETTER

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

SUBJECT: SAI	FE HARBOR DATA , INC.			
 .	(PROPOSED CORPORA	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an ori	iginal and one (1) copy of the art	ticles of incorporation and	l a check for:	7
\$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		
	Dhille Janes			
FROM: _	Philip Jones Name	e (Printed or typed)	- <u></u>	
	1420 Oak Hill Drive			
		Address		DIVISION O4 SEP
	Dunedin , Florida 34698 City	, State & Zip		1
	727-734-9572	•		PH 12: 5
		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)

NAME ARTICLE I

The name of the corporation shall be:

SAFE HARBOR DATA, INC.

PRINCIPAL OFFICE ARTICLE II

The principal place of business/mailing address is: 7222 Cambridge Way Clearwater, FI 33764

ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

COORPUTER SERVICES.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 shares authorized

INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s):

Solomon Spencer 7222 Cambridge Way Clearwater, FI 33764

Philip Jones 1420 Oak Hill Drive Dunedin, Fl 34698

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Solomon Spencer 7222 Cambridge Way Clearwater, Fl

INCORPORATOR ARTICLE VII

The name and address of the Incorporator is:

Philip Jones 1420 Oak Hill Drive Dunedin , Fl. 34698

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

re/Registered Agent