

P05000003746

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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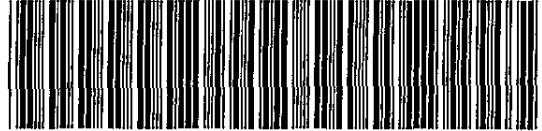
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05 JAN -7 PM 1:33
STATE
SECRETARY
TALLAHASSEE, FLA

C.2.1-7

TRANSMITTAL LETTER

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

SUBJECT: Superb Delivery Service, 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: Superb Delivery Service, Inc.
Name (Printed or typed)

PMB 285 1700 North Monroe Street, Suite 11
Address

Tallahassee, Florida 32303
City, State & Zip

850-294-8431
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:

Superb Delivery Service, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

PMB 285 1700 North Monroe Street, Suite 11
Tallahassee, Florida 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Courier Service

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Jermaine Jackson, President
PMB 285 1700 North Monroe Street, Suite 11
Tallahassee, Florida 32303

Chiquita Jackson, Vice-President
PMB 285 1700 North Monroe Street, Suite 11
Tallahassee, Florida 32303

ARTICLE VI REGISTERED AGENT

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

Jermaine Jackson
PMB 285 1700 North Monroe Street, Suite 11
Tallahassee, Florida 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jermaine Jackson
PMB 285 1700 North Monroe Street, Suite 11
Tallahassee, Florida 32303

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

Jermaine Jackson
Signature/Registered Agent

Jermaine Jackson
Signature/Incorporator

01/04/05
Date

01/04/05
Date

FILED
05 JAN - 7 PM 1:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA