

P05000020399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

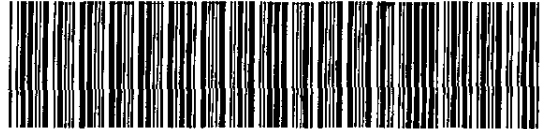
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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C.L. 2-9

## TRANSMITTAL LETTER

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

SUBJECT: CLOVA SERVICES 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: NICHOLAS SEALY  
Name (Printed or typed)

11925 NE 2<sup>nd</sup> AVE BLDG B 408  
Address

MIAMI FL 33161  
City, State & Zip

212-203-5344  
~~305-893-0029~~  
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:

CLOVA SERVICES INC

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

11925 NE 2<sup>nd</sup> AVE BLDG B #406  
MIAMI FI 33161

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

operate as a profitable buisness under the laws  
that govern the State of Florida. The primary focus of  
this company will be marketing + distribution.

**ARTICLE IV SHARES**

The number of shares of stock is:

10,000 shares valued at \$0.25 / stock.

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

NICHOLAS SEALY  
PRESIDENT / CEO  
11925 NE 2<sup>nd</sup> AVE BLDG B #406  
MIAMI FI 33161

**ARTICLE VI REGISTERED AGENT**

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

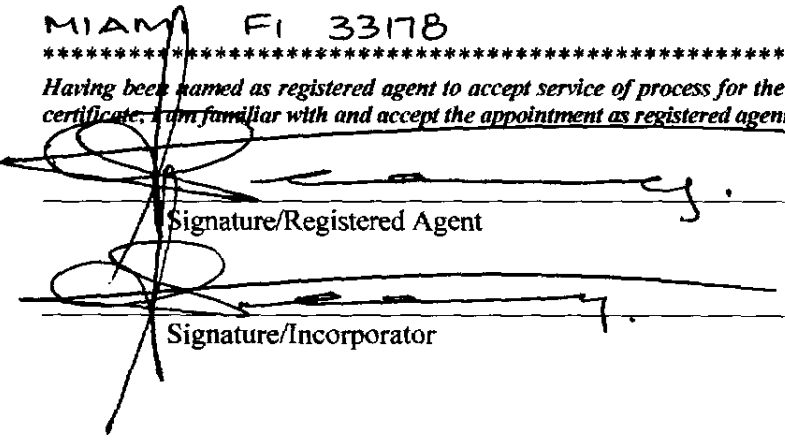
ASA SEALY  
4564 NW 114<sup>th</sup> AVE #1411  
MIAMI FI 33178

**ARTICLE VII INCORPORATOR**

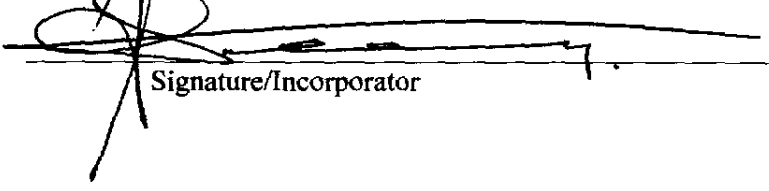
The name and address of the Incorporator is:

ASA SEALY  
4564 NW 114<sup>th</sup> AVE #1411  
MIAMI FI 33178

\*\*\*\*\*  
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

12/01/04  
Date

  
Signature/Incorporator

12/01/04  
Date

FILED

05 FEB -2 AM 10:36

TELETYPE UNIT  
TALLAHASSEE, FLORIDA