

PS800066622

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

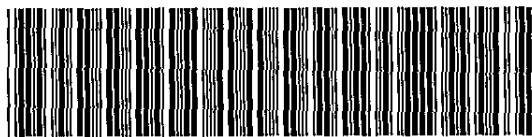
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## TRANSMITTAL LETTER

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

SUBJECT: SYNERGY CORPORATION OF NORTH FLORIDA  
(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: JAMES PHILLIPS  
Name (Printed or typed)

3516 LARKWAY ST  
Address

TALLAHASSEE, FL 32305  
City, State & Zip

(850) 339-9199  
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:

SYNERGY CORPORATION OF NORTH FLORIDA

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

3516 LARKWAY STREET, TALLAHASSEE, FL, 32305

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Create an online electronic store

**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):

JAMES Phillips; TALL, FL, CEO  
LESLIE Phillips; TALL, FL, V. P.

**ARTICLE VI REGISTERED AGENT**

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

JAMES Phillips  
3516 LARKWAY ST  
TALLAHASSEE, FL 32305

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

LESLIE Phillips  
3516 LARKWAY ST  
TALLAHASSEE, FL, 32305

\*\*\*\*\*

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

4-10-05

Date



Signature/Incorporator

4-10-05

Date

FILED  
05 MAY - 6 PM 1:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA