P05000114266

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
ANTHORIZATION BY PHONE TO CORRECT (Inticle) II + IIII DATE \$1/7/65 BOC. EXAM / MPD

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05 AUG 17 PM of to

MR\$ 8/17

TRANSMITTAL LETTER

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

SUBJECT:	Post	Retirement	Planning	Inc.
	(PROF	POSED 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

\$87.50

Filing Fee & Certified Copy

Filing Fee, Certified Copy

& Certificate of

Status

ADDITIONAL COPY REQUIRED

Joseph Poung Name (Printed or typed)
90/ E Lenga s+ #B
Lakeland Fl 33801
City, State & Zip
863-529-4388 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)	SECRETARY OF STATE TALLAHASSEE. FLORIDA 05 AUG 17 PH 2: 12
ARTICLE I NAME The name of the corporation shall be:	2:12
Post Retirement Planning INC.	
ARTICLE II PRINCIPAL OFFICE The principal place of business/mailing address is: 901 E. Lemon St. # 8	-
ARTICLE III PURPOSE The purpose for which the corporation is organized is:	a
Retirement Planning	
ARTICLE IV SHARES The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):	
Joseph Young 901 E. Lemon St. #B LAKE/AND, FL 33801 - General MANAGE	OR.
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent for Soseph Hourget. #B Lakeland, FL 33801	at is:
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: 909 E. Lemon 54, #B	
LAKE IAND, FL 33801 ************************************	******
Having been named as registered agent to accept service of process for the above stated corporation at certificate, I am familiar with and accept the appointment as registered agent and agree to act in this cap	the place designated in this
Signature/Registered Agent	Date
Signature/Incorporator 8	11 05 Date