

P05000128297

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

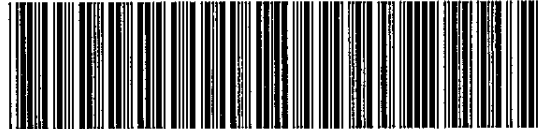
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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15 SEP 19 PM 2:25

STATE
CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
05 SEP 19 PM 1:41
TALLAHASSEE, FLORIDA

9/19/05

COVER LETTER

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

SUBJECT: High Demention Investment, 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: High Demention Investment, Inc.

Name (Printed or typed)

2509 Hill Lake

Address

Tallahassee, Florida 32308

City, State & Zip

850-386-8148

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:

High Demention Investment, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2509 Hill Lake, Tallahassee, Florida 32308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Investment

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):

Almando Mullings, 2509 Hill Lake, Tallahassee, Fl 32308, President

Joanna B. Mullings, 2509 Hill Lake, Tallahassee, Fl 32308, Vice-President

ARTICLE VI REGISTERED AGENT

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

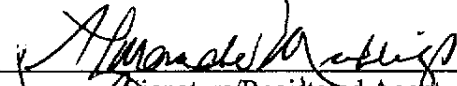
Almando Mullings, 2509 Hill Lake, Tallahassee, Fl 32308

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Almando Mullings, 2509 Hill Lake, Tallahassee, Fl 32308

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



Signature/Incorporator

FILED
05 SEP 19 PM 1:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Date



Date