

P05000161685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

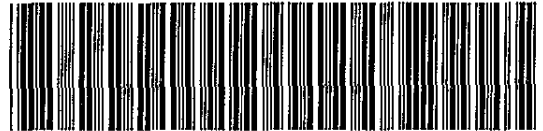
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05 DEC -8 PM 2:40
CLERK OF STATE
TALLAHASSEE, FLORIDA

VIA

COVER LETTER

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

SUBJECT: Possibility Squared, 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: John G. Matta

Name (Printed or typed)

1795 Bayhill Dr.

Address

Oldsmar, FL. 34677

City, State & Zip

727-743-5481

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:

Possibility Squared, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1795 Bayhill Dr. Oldsmar, FL. 34677

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To Sell Crystals, Minerals, Rocks & Art

ARTICLE IV SHARES

The number of shares of stock is:

1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

John G. Matta - 1795 Bayhill Dr. Oldsmar, FL. 34677 - President/Owner

Kim L. Matta - 1795 Bayhill Dr. Oldsmar, FL. 34677 - Vice President/Operations Mgr./Owner

ARTICLE VI REGISTERED AGENT

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


John G. Matta - 1795 Bayhill Dr. Oldsmar, FL. 34677

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

John G. Matta - 1795 Bayhill Dr. Oldsmar, FL. 34677


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

12/5/2005

Date



Signature/Incorporator

12/5/2005

Date

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA