

POLXXXXX4418

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

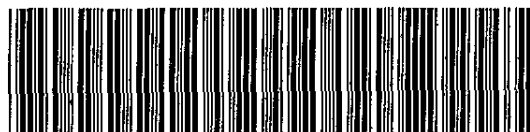
(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/12
54

COVER LETTER

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

SUBJECT: SMS Group, 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: SMS Group, Inc.

Name (Printed or typed)

1028 Royal Pass Road

Address

Tampa, FL 33602

City, State & Zip

(813) 639-0139

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:

SMS Group, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1028 Royal Pass Road
Tampa, FL 33602

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To conduct all legal business enterprises.

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):

Tami Soroka, President and CEO
1028 Royal Pass Road
Tampa, FL 33602

ARTICLE VI REGISTERED AGENT

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

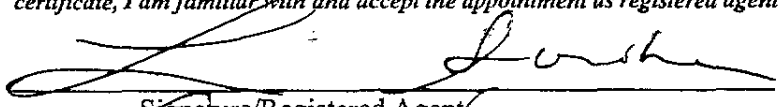
Tami Soroka
1028 Royal Pass Road
Tampa, FL 33602

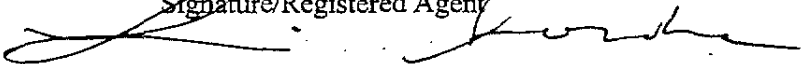
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tami Soroka
1028 Royal Pass Road
Tampa, FL 33602

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/5/06
Date

1/5/06
Date