

PO6000057808

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

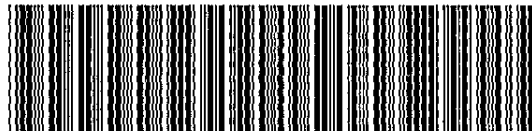
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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## COVER LETTER

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

SUBJECT: Shamballah Incorporation 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: Charlene Spencer  
Name (Printed or typed)

7816 Southside Blvd #129  
Address

Jacksonville FL 32256  
City, State & Zip

-904-382-3409  
Daytime Telephone number

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

06 APR 24 PM 2:47

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

April 17, 2006

CHARLENE SPENCER  
7816 SOUTHSIDE BLVD  
# 29  
JACKSONVILLE, FL 32256

SUBJECT: SHAMBALLAH INC.  
Ref. Number: W06000018042

We have received your document for SHAMBALLAH INC., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State.

The fees for profit and nonprofit, domestic or foreign are as follows:

Filings Fees:	\$35.00
Registered Agent	
Designation	\$35.00
Certified Copy	\$8.75
Certificate of Status	\$8.75

The document must state the number of shares of authorized stock.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton  
Document Specialist  
New Filing Section

Letter Number: 806A00025929

# 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:

Shamballah Inc.

## ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7816 Southside Blvd #29  
Jacksonville FL 32256

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To transact lawful business

## ARTICLE IV SHARES

The number of shares of stock is:

1

## ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Charlene Spencer - owner  
7816 Southside Blvd #29  
Jacksonville FL 32256

## ARTICLE VI REGISTERED AGENT

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

Charlene Spencer  
7816 Southside Blvd #29  
Jacksonville FL 32256

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Charlene Spencer  
7816 Southside Blvd #29  
Jacksonville FL 32256

\*\*\*\*\*

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

Charlene Spencer  
Signature/Registered Agent

Charlene Spencer  
Signature/Incorporator

FILED

2006 APR 24 PM 3:07

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4-10-06  
Date

4-10-06  
Date