

P06000116750

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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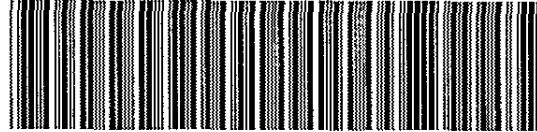
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2006 SEP -8 AM 11:53

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Hampton SEP 11 2006

COVER LETTER

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

SUBJECT: Reed Business Solutions 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: Tracy A. Reed

Name (Printed or typed)

7019 Tynan Ave

Address

Jacksonville, Florida 32211

City, State & Zip

904-727-9108

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:

Reed Business Solutions inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

7019 Tynan Ave.
Jacksonville, Florida 32211

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Sales and Marketing Services
A professional corporation

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):

Tracy A. Reed
President
7019 Tynan Ave.
Jacksonville, Florida 32211

ARTICLE VI REGISTERED AGENT

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

Tracy A. Reed
7019 Tynan Ave.
Jacksonville, Florida 32211

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tracy A. Reed
7019 Tynan Ave.
Jacksonville, Florida 32211

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

9/6/06

Date

9/6/06

Date