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COVER LETTER

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

SUBJECT: CYBER SALES, INC.		
(PROPOSED CORPOR	RATE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an original and one (1) copy of the a	rticles of incorporation an	d a check for:
\$70.00 \$78.75	☐ \$78.75	₹87.50
Filing Fee Filing Fee & Certificate of Status	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate of
		Status
	ADDITIONAL CO	OPY REQUIRED
,		
FROM: JOLIE PUGH		
Nar	ne (Printed or typed)	
5835 HOOT OWL LANE		
	Address	
MILTON, FLORIDA 3257	O ty, State & Zip	
Ci	ry, Diane & Zip	
1-786-280-9890		
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:

CYBER SALES, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

5835 HOOT OWL LANE MILTON, FLORIDA 32570

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS ON THE INTERNET

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):

TITLE: PRESIDENT SONYA FOWLER 5000 PILGRIM TRAIL WEST

TITLE: SECRETARY
JOLIE PUGH
5635 HOOT OWN LANE
MILTON, FLORIDA 32570

TITLE: V-PRESIDENT JOLIE PUGH 685 HOOT OWL LANE 685 TON EL CRIDA POST

TITLE: TREASURER SONYA FOWLER 3900 PILGRIM TRAIL WES MOLINO, FLORIDA 32577

ARTICLE VI REGISTERED AGENT

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

JOLIE PUGH 5835 HOOT OWL LANE MILTON, FLORIDA 32570

ARTICLE VII INCORPORATOR

The <u>name and address</u> of the Incorporator is:

JOLIE PUGH 5835 HOOT OWL LANE MILTON, FLORIDA 32570

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

Oslio a. Punh	2-5-2007
Signature/Registered Agent	Date
Oplie a. Push	2-5-07
Signature/Incorporator	Date

07 FEB -8 AM 10: 13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA