

P07000064732

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

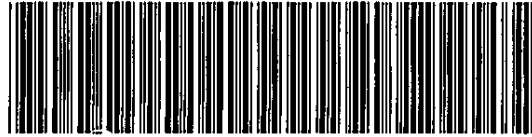
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500102688815

05/18/07--01034--021 \*\*78.75

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

07 JUN - 1 PM 1:08

FILED

~~6007-24218~~

*[Handwritten signature]*  
6/1

**COVER LETTER**

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

**SUBJECT:** Scarlett Services, 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:** Maureen Chavez

Name (Printed or typed)

612 North K Street

Address

Lake Worth, Fl. 33460

City, State & Zip

561-588-0828

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 21, 2007

MAUREEN CHAVEZ  
612 NORTH K STREET  
LAKE WORTH, FL 33460

SUBJECT: SCARLETT SERVICES, INC.  
Ref. Number: W07000024218

We have received your document for SCARLETT SERVICES, INC.. However, the document has not been filed and is being returned for the following:

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is P04000161045 - SCARLETT SERVICES, INC..

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) 245-6934.

Loria Poole  
Document Specialist  
New Filing Section

Letter Number: 607A00035196

**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:

Scarlett Communications, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

612 North K Street  
Lake Worth, Fl. 33460

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

sales/customer service telecommunications

**ARTICLE IV SHARES**

The number of shares of stock is:

100 with a par value of \$0.01

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Maureen Chavez, President  
612 North K Street  
Lake Worth, Fl. 33460

**ARTICLE VI REGISTERED AGENT**

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

Maureen Chavez  
612 North K Street  
Lake Worth, Fl. 33460

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

maureen chavez  
612 North K Street  
Lake Worth, Fl. 33460

\*\*\*\*\*  
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

Maureen Chavez  
Signature/Registered Agent

Maureen Chavez  
Signature/Incorporator

5-26-07  
Date

5-26-07  
Date

FILED  
07 JUN - 1 PM 1:08  
CLERK OF STATE  
TALLAHASSEE, FLORIDA