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SECRETARY OF STATE



# **COVER LETTER**

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

SUBJECT: Genesis Equity Manager	ment Inc.		
(PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	d a check for:	
\$70.00 \$78.75 Filing Fee Filing Fee	\$78.75 Filing Fee	\$87.50 Filing Fee,	
& Certificate of Status	& Certified Copy	Certified Copy & Certificate of	
	Status ADDITIONAL COPY REQUIRED		
FROM: Heather Brooks			
Name (	(Printed or typed)		
178 SW Glenwood Dri	ve		
A	Address		
Port St. Lucie, FL 3498			
City,	State & Zip		
(954) 668-6800			
Daytime Te	elephone 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:

'Genesis Equity Management Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

178 SW Glenwood Drive, Port St. Lucie, FL 34984

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

**Business Management** 

### ARTICLE IV SHARES

The number of shares of stock is:

75,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

is is name(s), address(es) and specific title(s

Robert Brooks - President 178 SW Glenwood Drive, Port St. Lucie, FL 34984

Heather Brooks - Director 178 SW Glenwood Drive, Port St. Lucie, FL 34984

Heather Brooks - Secretary 178 SW Glenwood Drive, Port St. Lucie, FL 34984

Robert Brooks - Treasurer 178 SW Glenwood Drive, Port St. Lucie, FL 34984

### ARTICLE VI REGISTERED AGENT

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

Robert Brooks 178 SW Glenwood Drive, Port St. Lucie, FL 34984

### ARTICLE VII INCORPORATOR

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

Robert Brooks - President 178 SW Glenwood Drive, Port St. Lucie, FL 34984

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 Robert Brooks

Date

U:30:07

Signature/Incorporator Robert Brooks

Date

FILED

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SECRETARY OF STATE
TAIL AHASSEF FLORIDA