

PO7000086192

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP



WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies 1

Certificates of Status _____

Special Instructions to Filing Officer:

*78.75

Office Use Only



500106132765

07/31/07--01044--012 **128.75

RECEIVED

07 JUL 31 PM 2:12

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

07 JUL 31 PM 2:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
7/31

COVER LETTER

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

SUBJECT: Secure Global Investments
(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: Jermaine A. Jones
Name (Printed or typed)

5704 wingate Dr.
Address

Orlando, FL 32839
City, State & Zip

(407) 925-7862
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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

Secured Global Investments, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

5704 wingate Dr.
Orlando, FL 32839

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Any and all 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):

Jermaine A. Jones (CEO) ; Leroddy J. Battle (President) ^{Vice}
5704 wingate br.
Orlando, FL 32839
6344 Dickens br.
Jacksonville, FL 32244

ARTICLE VI REGISTERED AGENT

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

Jermaine Jones
5704 wingate br.
Orlando, FL 32839

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Jermaine Jones
5704 wingate br.
Orlando, FL 32839

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

7/31/07

Date

7/31/07

Date

APPLICATION FOR REGISTRATION OF FICTITIOUS NAME

Note: Acknowledgements/certificates will be sent to the address in Section 1 only.

Section 1

1. Big Swag Entertainment
Fictitious Name to be Registered (see instructions if name includes "Corp" or "Inc")

5704 wingate Dr.
Mailing Address of Business
Orlando, FL 32839
City State Zip Code

3. Florida County of principal place of business: Orange
(see instructions if more than one county)

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07 JUL 31 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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This space for office use only

Section 2

A. Owner(s) of Fictitious Name If Individual(s): (Use an attachment if necessary):

1. Last First M.I. Address City State Zip Code

2. Last First M.I. Address City State Zip Code

B. Owner(s) of Fictitious Name If other than an individual: (Use attachment if necessary):

1. Secured Global Investments, Inc.
Entity Name
5704 wingate Dr.
Address
Orlando, FL 32839
City State Zip Code
Florida Registration Number 207000086192
FEI Number: ☒ Applied for ☐ Not Applicable

Entity Name Address City State Zip Code Florida Registration Number FEI Number: ☐ Applied for ☐ Not Applicable

Section 3

I (we) the undersigned, being the sole (all the) party(ies) owning interest in the above fictitious name, certify that the information indicated on this form is true and accurate. In accordance with Section 865.09, F.S., I (we) understand that the signature(s) below shall have the same legal effect as if made under oath. (At Least One Signature Required)

[Signature] 7/31/07
Signature of Owner Date
Phone Number: (407) 925-7862

[Signature]
Signature of Owner Date
Phone Number:

Section 4

**FOR CANCELLATION COMPLETE SECTION 4 ONLY:
FOR FICTITIOUS NAME OR OWNERSHIP CHANGE COMPLETE SECTIONS 1 THROUGH 4:**

I (we) the undersigned, hereby cancel the fictitious name
 , which was registered on and was assigned
registration number

Signature of Owner Date Signature of Owner Date

Mark the applicable boxes ☐ Certificate of Status — \$10 ☐ Certified Copy — \$30

NON-REFUNDABLE PROCESSING FEE: \$50