

P07000 134627

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

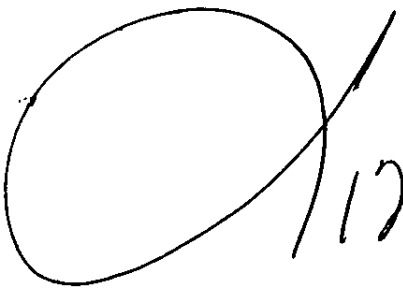
(Document Number)

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2007 DEC 26 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

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

FOOTNOTE

SUBJECT: TRANSLATIONS, 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: MS. NATHALIE COUET
Name (Printed or typed)

8800 SW 123rd COURT APT. J-309
Address

MIAMI, FL 33186
City, State & Zip

(786) 554-9638
Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 14, 2007

MS. NATHALIE COUPET
8800 SW 123RD COURT
APT. J-309
MIAMI, FL 33186

SUBJECT: FOOTNOTE TRANSLATIONS, INC.
Ref. Number: W07000060649

We have received your document for FOOTNOTE TRANSLATIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return 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
Regulatory Specialist II

Letter Number: 307A00070162

RECEIVED
07 DEC 26 AM 8:00
DIVISION OF CORPORATIONS

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:

FOOTNOTE
~~FOOTNOTE~~ TRANSLATIONS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

~~PO BOX~~ 8800 SW 123rd COURT
Apt. J-309 Miami, FL 33186

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

TRANSLATION AND INTERPRETATION SERVICES

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

NATHALIE COUPET 8800 SW 123rd COURT APT. 309-J PRESIDENT
Miami, FL 33186

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 DEC 26 AM 11:48

FILED

ARTICLE VI REGISTERED AGENT

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

NATHALIE COUPET 8800 SW 123rd COURT APT. 309-J
MIAMI, FL 33186

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

NATHALIE COUPET 8800 SW 123rd COURT APT. 309-J
MIAMI, FL 33186

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

Nathalie Coupet
Signature/Registered Agent

11/16/2007
Date

Nathalie Coupet
Signature/Incorporator

11/16/2007
Date

2007 DEC 26 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED