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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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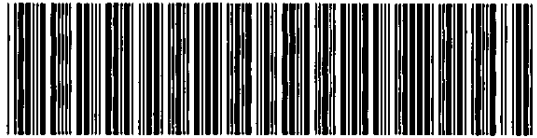
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1/10/08  
1/10/08

**COVER LETTER**

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

**SUBJECT: NBU & ASSOCIATES 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: TAMIKA MOSES**

Name (Printed or typed)

**2617 SW 84 TERRACE**

Address

**MIRAMAR, FL 33025**

City, State & Zip

**954-625-5377**

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:

**NBU & ASSOCIATES INC**

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2617 SW 84 TERRACE  
MIRAMAR, FL 33025

**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:

**100**

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

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

TAMIKA MOSES (CFO)  
2617 SW 84 TERRACE  
MIRAMAR, FL 33025

ROBIN JONES (CEO)  
2617 SW 84 TERRACE  
MIRAMAR, FL 33025

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**ARTICLE VI REGISTERED AGENT**

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

TAMIKA MOSES  
2617 SW 84 TERRACE  
MIRAMAR, FL 33025

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

TAMIKA MOSES  
2617 SW 84 TERRACE  
MIRAMAR, FL

\*\*\*\*\*  
*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*

Tamika Moses  
Signature/Registered Agent  
Tamika Moses  
Signature/Incorporator

1/10/08  
Date  
1/10/08  
Date

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