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(Requestor's Name)					
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PICK-UP WAIT MAIL					
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(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Shivers JUN 2 7 2008

# · COVER LETTER

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

SUBJECT: Safety C	Sadgets and Gizmos, Inc. (PROPOSED CORPORA	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	<u></u>
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	a check for:	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED	
FROM: <u>Co</u>	illeen Johnson Name (	Printed or typed)		
1 South Pine Island Road # 203 Address Address				2008 JUN 26
City, state & Zip				
	754-204-1911 Daytime T	elephone number	# # # # # # # # # # # # # # # # # # #	8: 52

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:

Safety Gadgets and Gizmos, Inc.

# ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

600 N. Pine Island Road Suite 450 Plantation, FL. 33324

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business

## ARTICLE IV

The number of shares of stock is: 1,000 shares

# INITIAL OFFICERS AND/OR DIRECTORS

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

Colleen Johnson

**PST** 

600 N. Pine Island Road Suite 450

Plantation, FL. 33324

Thelma Barrett

**VPD** 

600 N. Pine Island Road Suite 450

Plantation, FL.33324

### ARTICLE VI REGISTERED AGENT

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

Colleen Johnson

600 N. Pine Island Road Suite 450

Plantation, FL. 33324

### ARTICLE VII **INCORPORATOR**

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

Colleen Johnson 600 N. Pine Island Road Suite 450 Plantation, FL. 33324

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