P08099991783

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	ne)
(Doc	ument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



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09/15/08--01010--001 **70.00





COVER LETTER

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

SUBJECT: Beyond Expe	ctation, I	nC.
(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	a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status PY REQUIRED

FROM: Tvy Hun Name ((Printed or typed)	
560 Jef	Ferson Dr. Address	ive#103
<u>Deerfield</u> City,	Beach, Fl. 3 State & Zip	3442
561-8 Daytime T	80-7569 elephone number	

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 18, 2008

IVY HURKIN 560 JEFFERSON DRIVE #103 DEERFIELD BEACH, FL: 33442

SUBJECT: BEYOND EXPECTATION INC

Ref. Number: W08000043088

Ŋ.

We have received your document for BEYOND EXPECTATION 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):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of 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) 245-6052.

Paisley A Alford Clerk New Filing Section

Letter Number: 208A00050459

ARTIC	LES OF INC	ORPORA	TIUN			
In compl	ance with Chap	ter 607 and/o	r Chapter 621,	F.S. (Profit)		
ARTICI		<u>E</u>				
	of the corporation			,		
ove	& Be	yond	Expe	ctatio	n, InC	
ARTICI		CIPAL OFF				
The princ	ipal <u>street</u> addre	ss and mailing	g address, it dit	terent is:	# 10	2
	<u></u>	560 c	leffers	on Driv	0 74-10	
	ي	Deerti	eld Bed	ach, FL	3344 2	
ARTICI				-		
The purp	ose for which th	e corporation	is organized is	s: / -	/.	0
フ	o Drow	ide S	apport	Coordin	ation s	services for Programs-
10	dividua	1s on-	the Me	dicard	Waver	r Programs-
ARTICI	EIV SHA	ARES	, -			U
The numb	per of shares of st	ock is: /C	00 @	\$1.00 4	rack	
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ARTICL	E V INITI	AL OFFICE	ers and/or	DIRECTOR	S	EX 8
	(s), address(es)			·	-	
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562	Jeffe	2007	oiva #	103		
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D ee	rfield	Deach	$\gamma_1 F L$, \Rightarrow	3712		
ARTICL	EVI REC	GISTERED	AGENT			(*)
The name	and Florida st			Tacceptable) of	the registered a	agent is:
Tru	Hunkin	_	u ma			
5/0/0	Hurkin Jefferso	, Dnve	#103			
Deer	Are Id BCA	wh Fl.	33442			
ARTICI	E.VIIINC	ODDODAM the Incomor	ator is:			
The name	and address of	uie meorpore	****			
IVY	Hunkin	\int_{0}^{1}	#103			
546	Jetters	on Dri	1 3344	2		
Dee	Hunking Jeffers Teld B	14******	******	******	******	ion at the place designated in
Having be	en named as regist	ered agent to ac	cept service of pr	ocess for the aboristered agent and	ve stated corporal agree to act in this	ion at the place designated in s capacity
certificate,	en named as regist I am familiar with	and accept the a	рроттепі из тев -	,	=	- 0
	12.	1/1/21	b4)			7-11-0000
	Ciaratur	e/Registered	Agent			$\frac{9-11-2008}{\text{Date}}$
	Sigpatui	Lurk				
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	Signat	ure/Incorpora	g.Ui			