

PO8000106278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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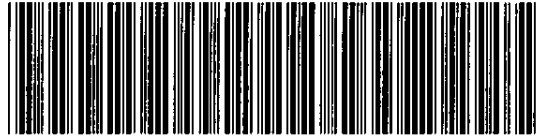
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: New Edge Business Solutions, 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: CAROLYN ZDZIERAK

Name (Printed or typed)

11555 PINE ST

Address

SEMINOLE, FL 33772

City, State & Zip

727-686-5764

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:

New Edge Business Solutions, Inc.

ARTICLE II PRINCIPAL OFFICE

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

11555 PINE ST
SEMINOLE, FL 33772

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALES AND CONSULTING.

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):

CAROLYN ZDZIERAK - DIRECTOR
11555 PINE ST
SEMINOLE, FL 33772

ARTICLE VI REGISTERED AGENT

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

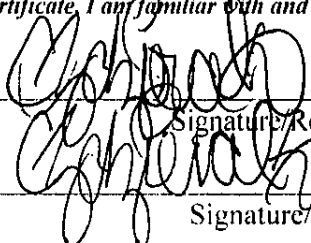
CAROLYN ZDZIERAK
11555 PINE ST
SEMINOLE, FL 33772

ARTICLE VII INCORPORATOR

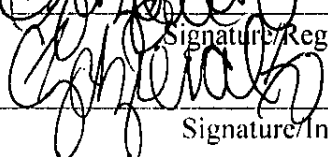
The name and address of the Incorporator is:

CAROLYN ZDZIERAK
11555 PINE ST
SEMINOLE, FL 33772

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

CAROLYN ZDZIERAK

12/01/2008

Date

12/01/2008

Date

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CLERK OF STATE
TALLAHASSEE, FLORIDA