

P09.000010487

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

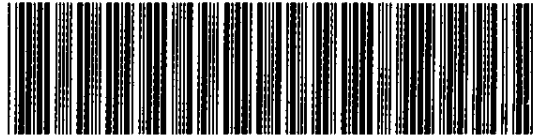
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2009 FEB -2 PM 3:51

g 2/03/09

COVER LETTER

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2009 FEB -2 PM 3:51

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

SUBJECT: GRAND HORIZONS 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: Peter Rugg  
Name (Printed or typed)

13 Bellemeade cir  
Address

Largo, FL 33770  
City, State & Zip

727-366-3652  
Daytime Telephone number

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



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DIVISION OF CORPORATIONS

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 9, 2009

PETER RUGG  
13 BELLEMEADE CIR  
LARGO, FL 33770

SUBJECT: GRAND HORIZONS INC.  
Ref. Number: W09000001044

We have received your document for GRAND HORIZONS 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 is illegible and not acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**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) 245-6973.

Claretha Golden  
Regulatory Specialist II  
New Filing Section

Letter Number: 009A00000822

**ARTICLES OF INCORPORATION**

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION

2009 FEB -2 PM 3: 51

**ARTICLE I NAME**

The name of the corporation shall be;

OPEN PASS INC.

**ARTICLE II PRINCIPAL OFFICE**

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

13 Belle Meade Circle  
Largo, Florida 33770

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Product Specialist

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

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

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

Peter Rugg President  
13 Belle Meade Circle  
Largo, Florida 33770

**ARTICLE VI REGISTERED AGENT**

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

Peter Rugg  
13 Belle Meade Circle  
Largo, Florida 33770

**ARTICLE VII INCORPORATION**

The name and address of the Incorporator is:

Peter Rugg  
13 Belle Meade Circle  
Largo, Florida 33770

.....  
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 a registered agent and agree to act in this capacity.

\_\_\_\_\_  
Signature Registered Agent

1/5/09  
\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature Registered Agent

1/5/09  
\_\_\_\_\_  
Date