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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:** Personal Equity, 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: Gregory Iuelle  
Name (Printed or typed)

5720 NW North Macedo Blvd.  
Address

Port Saint Lucie, FL 34983  
City, State & Zip

772-340-3149  
Daytime Telephone number

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**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:

Personal Equity, Inc.

### **ARTICLE II PRINCIPAL OFFICE**

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

5720 NW North macedo Blvd Port St Lucie FL 34983

### **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose of the corporation is to conduct any lawful purpose or purposes.

### **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):

Gregory luelle 5720 NW North Macedo Blvd., Port Saint Lucie, FL 34983 President/Treasurer

Tammy luelle 5720 NW North Macedo Blvd., Port Saint Lucie, FL 34983 Vice President/Secretary

### **ARTICLE VI REGISTERED AGENT**

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

Corporation Service Company

1201 Hays Street, Tallahassee, FL 32301

### **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Gregory luelle

5720 NW North Macedo Blvd., Port Saint Lucie, FL 34983

\*\*\*\*\*

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

Samont W Jones, Assistant VP

Signature/Registered Agent

Date

Signature/Incorporator

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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