

PO9000070651

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

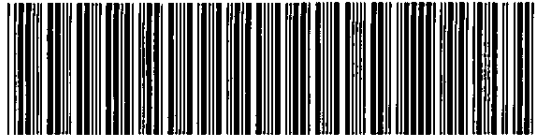
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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08/10/09--01029--018 \*\*70.00

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2009 AUG 20 P 1:30

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

~~10-21-2009~~  
10-21-2009  
10-21-2009

## COVER LETTER

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

**SUBJECT:** Quality Results, 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

<input type="checkbox"/> \$78.75	<input type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

**ADDITIONAL COPY REQUIRED**

FROM: Tashona Best  
Name (Printed or typed)

16345 Dinsdale Dr  
Address

Spring Hill FL 34610  
City, State & Zip

813-996-2655  
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 11, 2009

TASHONA BEST  
16345 DINSDALE DR.  
SPRING HILL, FL 34610

SUBJECT: QUALITY RESULTS, INC.  
Ref. Number: W09000036292

We have received your document for QUALITY RESULTS, 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 contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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) 245-6995.

Wanda Cunningham  
Regulatory Specialist II  
New Filing Section

Letter Number: 009A00027329

RECEIVED  
DEPARTMENT OF STATE  
09 AUG 20 AM 10:36

# 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:

Quality Results, Inc.

## ARTICLE II PRINCIPAL OFFICE

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

16345 Dinsdale Dr  
Spring Hill, FL 34610

## ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

## 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):

Tashona Best - President  
16345 Dinsdale Dr  
Spring Hill, FL 34610

## ARTICLE VI REGISTERED AGENT

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

Tashona Best  
16345 Dinsdale Dr  
Spring Hill, FL 34610

## ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Tashona Best  
16345 Dinsdale Dr  
Spring Hill, FL 34610

\*\*\*\*\*

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

Tashona Best

Signature/Registered Agent

Tashona Best

Signature/Incorporator

8/16/09

Date

8/16/09

Date

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2009 AUG 20 P 1:30

FILED