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Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			
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SECRETARY OF STATE

APP HOVE

# **COVER LETTER**

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

SUBJECT:	Results, Inc. (PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)			
	(PROPOSED CORPORA	TTE NAME – <u>MUST INCL</u>	<u>ude suffix</u> )	
Enclosed are an orig	inal and one (1) copy of the art	icles of incorporation and	l a check for:	
\$70.00 Filing Fee	☐ \$78.75 Filing Fee & Certificate of Status	□ \$78.75 Filing Fee & Certified Copy	<ul><li></li></ul>	
	ADDITIONAL COPY I		PY REQUIRED	
FROM:	Nam	ine T. Hardtke e (Printed or typed)  SE 5th Ter		
		Address		
		oral, FL 33990		
	City	, State & Zip		
		-222-6882 Felephone number		
	khardtk	e@gmail.com		
	E-mail address: (to be use	ed for future annual report	notification)	

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



# FLORIDA DEPARTMENT OF STATE Division of Corporations

September 17, 2009

KATHERINE T. HARDTKE 2210 SE 5TH TER CAOE CORAL, FL 33990

SUBJECT: RESULTS, INC Ref. Number: W09000041761

We have received your document for RESULTS, INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

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 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) 245-6934.

Loria Poole Regulatory Specialist II

Letter Number: 909A00030646

09 SEP 28 AM II: 10
DEPARTMENT OF STATE
VISION OF CORPORATION

### 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:

Strategic Success, Inc.



The principal <u>street</u> address and mailing address, if different is: 2210 SE 5th Ter, Cape Coral FL 33990

#### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Speaking, Training and Writing

## 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):

Katherine T. Hardtke, President: 2210 SE 5th Ter, Cape Coral FL 33990 Paige K. Veugeler, Secretary: 2210 SE 5th Ter, Cape Coral FL 33990

#### ARTICLE VI REGISTERED AGENT

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

Katherine T. Hardtke: 2210 SE 5th Ter, Cape Coral FL 33990

#### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Katherine T. Hardtke: 2210 SE 5th Ter, Cape Coral FL 33990

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

9-22-09

Date

9-22-09

Date

