

P100000013345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

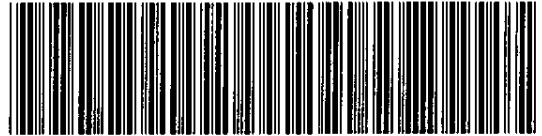
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700168314257

02/11/10--01018--007 **78.75

APPROVED
AND
FILED
10 FEB 11 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UH

COVER LETTER

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

SUBJECT: SERENE INNOVATIONS, 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: SYLVIA TROYER

Name (Printed or typed)

27 NE 19TH AVENUE

Address

POMPANO BEACH, FL 33060

City, State & Zip

931-239-9947

Daytime Telephone number

sylviatroyer@hotmail.com

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

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)

APPROVED
AND
FILED

10 FEB 11 PM 4:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

SERENE INNOVATIONS, INC.

ARTICLE II PRINCIPAL OFFICE

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

27 NE 19th AVENUE
POMPANO BEACH, FL 33060

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

SYLVIA TROYER, PRESIDENT & CEO
27 NE 19th AVENUE
POMPANO BEACH, FL 33060

ARTICLE VI REGISTERED AGENT

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

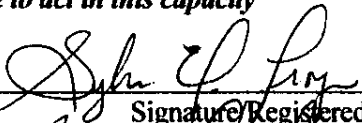
SYLVIA TROYER
27 NE 19th AVENUE
POMPANO BEACH, FL 33060

ARTICLE VII INCORPORATOR

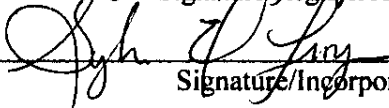
The name and address of the Incorporator is:

SYLVIA TROYER
27 NE 19th AVENUE
POMPANO BEACH, FL 33060

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

2/8/10
Date

2/8/10
Date