

P10000044846

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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05/10/10--01036--005 **70.00

FILED

10 MAY 24 PM 4:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W/ 0000022920

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S-25-10

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COVER LETTER

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

SUBJECT: SIGNATURE PASS, 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: Lisa L. Black, Incorporator

Name (Printed or typed)

7901 Blind Pass Road

Address

St Pete Beach, FL 33706

City, State & Zip

813-244-7104

Daytime Telephone number

lisa@blackandwhiteacc.com

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

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

RKS CONSULTING LLC

Mail: PO Box 292531
Tampa, FL 33687-2531
E-Mail: ruth@rksmithonline.com
Cell (920) 915-5460 • Fax (813) 988-8155

May 6, 2010

Ms. Christine Haney
Senior Clerk
New Filing Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re Signature Pass, Inc.

Dear Christine:

Thank you for your assistance in dissolving Signature Pass LLC. We are now ready to set up the new corporation, Signature Pass, Inc.

Review of our conversation approx. April 23, 2010: You instructed me to wait until I could see that the check for a refund had been issued as the name had been rejected because we had the LLC named Signature Pass LLC still of record although just newly filed recently late 2009 and our CPA had instructed us not to use the LLC and to set up the corporation structure instead.

I followed your instructions and sent in the dissolution of the LLC which you graciously handled for us. My understanding is that you can now manually accept the enclosed Cover Letter and Articles of Incorporation for Signature Pass, Inc. Check for \$70 also enclosed.

Thank you again for personally handling this for us. Should you have any questions, please email or call me on my cell.

Thank you.

Sincerely,



Ruth K. Smith

**Re SIGNATURE PASS LLC
& Signature Pass, Inc.
From Ruth K. Smith,
RKS Consulting LLC**

**Mail: PO Box 292531
Tampa, FL 33687-2531
E-Mail: rksmith@charter.net
Cell (920) 915-5460 • Fax (813) 988-8155**

May 21, 2010

Ms. Christine Haney
Senior Clerk
New Filing Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

FILED
10 MAY 24 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Re Signature Pass LLC Dissolution Affidavit

Dear Christine:

Thank you for your continued assistance on the phone this morning as to how to resolve dissolution of Signature Pass LLC in order to activate Signature Pass, Inc.

Enclosed please find:

Your original letter dated May 11, 2010 addressed to Lisa L. Black
Original Articles of Incorporation for Signature Pass, Inc.
Corporate Detail Record Screen
Fax copy of the original Affidavit submitted on April 23, 2010 for the dissolution of the LLC.

Hope this does it! Please note for the file that the mailing address for the new Inc. is the PO Box 67295, St Pete Beach, FL 33736 not the street address as used in your original letter. This is shown in the Articles of Incorporation, Article II.

Please email or call me if you need anything else.

Again, thank you.

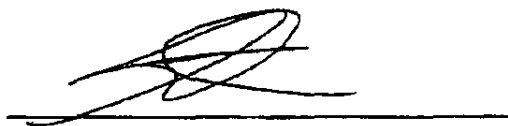
Sincerely,



Ruth K. Smith
Cell: 920-915-5460
Email: ruth@rksmithonline.com

AFFIDAVIT

This affidavit dated April 23, 2010 shall confirm that I, Lisa L. Black, as Registered Agent and only Member of Signature Pass LLC, state that the Dissolution of this LLC shall not be revoked and I agree not to request revocation of the Dissolution I have requested and submitted this date.

A handwritten signature in black ink, appearing to be "Lisa L. Black", written over a horizontal line.

Lisa L. Black

FILED
10 MAY 24 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 11, 2010

LISA L. BLACK
7901 BLIND PASS ROAD
ST. PETE BEACH, FL 33706

SUBJECT: SIGNATURE PASS, INC.
Ref. Number: W10000022920

We have received your document for SIGNATURE PASS, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

We must have not discussed the affidavit for releasing the name. Please send me that and we can proceed.

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) 245-6869.

Christine Haney
Senior Clerk
New Filing Section

Letter Number: 610A00011896

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:

SIGNATURE PASS, INC.

ARTICLE II PRINCIPAL OFFICE

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

7901 Blind Pass Road, St Pete Beach, FL 33706

MAIL: PO Box 67295, St Pete Beach, FL 33736

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:

15,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ARTICLE VI REGISTERED AGENT

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

Kostandinos Vartsakis

7901 Blind Pass Road

St Pete Beach, FL 33706

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Lisa L. Black

PO Box 67295, St Pete Beach, FL 33736

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

K Vartsakis

Signature/Registered Agent

Signature/Incorporator

5/6/10

Date

5/6/10

Date

FILED
10 MAY 24 PM 4:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA