

P10000045879

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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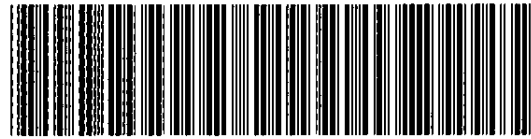
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: New Age Consultants 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: Julie A Supinski

Name (Printed or typed)

1019 Chamberlin Trail

Address

Saint Cloud FL 34772

City, State & Zip

203-668-5633

Daytime Telephone number

juliesupinski@gmail.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)

ARTICLE I NAME

The name of the corporation shall be:

New Age Consultants Inc.

ARTICLE II PRINCIPAL OFFICE

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

1019 Chamberlin Trail, Saint Cloud FL 34772

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Consulting

ARTICLE IV SHARES

The number of shares of stock is:
500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Julie A Supinski PRESIDENT
1019 Chamberlin
Trail Saint Cloud
FL 34772

ARTICLE VI REGISTERED AGENT

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

Julie A Supinski 1019 Chamberlin Trail Saint Cloud FL 34772

Julie A. Supinski Julie A. Supinski

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Julie A Supinski 1019 Chamberlin Trail Saint Cloud FL 34772

Julie A. Supinski Julie A. Supinski

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

Julie A. Supinski Julie A. Supinski 5/26/10
Signature/Registered Agent Date

Julie A. Supinski Julie A. Supinski 5/26/10
Signature/Incorporator Date

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TALLAHASSEE, FLORIDA