## PHODO181828

(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



200185253192

10/04/10--01021--012 \*\*78.75

2010 OCT -4 PH12: 46
SECRETARY OF STATE
TALLAHASSEF FI OBIE



## **COVER LETTER**

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

SUBJECT:	Salveneur,	*		_
	(PROPOSED CORPORAT	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	inal and one (1) copy of the artic	eles of incorporation and	a check for:	
■ \$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate of Status	
FROM:	JULIA COU	PER LEO (Printed or typed)	Sci PRENER	ur, INC.
	7231 Cord			
		ddress		
	Weston, City, S	FL. 3332 State & Zip	<del>7</del>	
	(434) Zd Daytime Te	2-56 c3		
	E-mail address: (to be used	erleo e yaho	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:
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:  Sci PRENEUR, INC.
ARTICLE II PRINCIPAL OFFICE The principal street address and mailing address, if different is:
2231 CORNOBA BEND WESTON, FL. 333ZZ
ARTICLE III PURPOSE  The purpose for which the corporation is organized is:
To enable return to work force; professional defetored and all other legal acts permitted general and business corporate.  The number of shares of stock is:  There are no shares of stock; there is \$0 stock value
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):
Julia CouperLeo ZZ31 cordoba Bend Weston, FL 333Z7 Officer and Director ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Julia Couper Leo 2231 Cordoba Bend Weston, FL.33327
ARTICLE VII INCORPORATOR
The <u>name and address</u> of the Incorporator is:
Julia Couper Les 2231 Cordoba Bend Weston, FL. 33827
**************************
Having been named as registered agent to accept service of process for the above stated corporation at the
- Mary Mystember in this comming a om monder word and discontine amandament as registere apell usu

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

JULIA COUFFL LED

Signature/Incorporator