

P110000006471

(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



900190054549

01/18/11--01021--026 **78.75

FILED
11 JAN 18 PM 1:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
1/20/11

COVER LETTER

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

SUBJECT: Success 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 Filing Fee
☒ \$78.75 Filing Fee
& Certificate of Status

☐ \$78.75 Filing Fee
& Certified Copy
☐ \$87.50 Filing Fee,
Certified Copy
& Certificate of
Status
ADDITIONAL COPY REQUIRED

FROM: JOVAN D. FERDINAND
Name (Printed or typed)

4403 LAMSON Ave.
Address

Spring Hill, FL, 34608
City, State & Zip

813 205 5138
Daytime Telephone number

SuccessINC @ 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: SUCCESS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
Jovan D. Ferdinand
5101 Ballard Crst. LN
Wesley Chapel, FL 33543

Mailing address, if different is:

4403 Lanson Ave Spring Hill
FL 34608

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To Provide a handy MAN Service, to the
community for a profit.

ARTICLE IV SHARES

The number of shares of stock is: ONE Hundred

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jovan D Ferdinand - President
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Jovan Ferdinand
Address: 5101 Ballard Crst. LN
Wesley Chapel, FL 33543

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jovan D Ferdinand
Address: 5101 Ballard Crst. LN
Wesley Chapel, FL 33543

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

Required Signature/Registered Agent

1/13/2011
Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Required Signature/Incorporator

1/13/2011
Date

FILED
11 JAN 18 PM 1:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA