

P11000012278

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

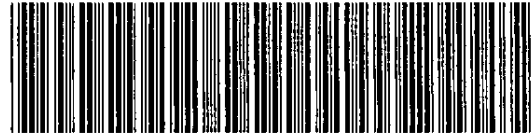
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800193005268

02/03/11--01023--003 **70.00

FILED
11 FEB -3 AM 11:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
2/4

COVER LETTER

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

SUBJECT: 2DaysProduct 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: Douglas H Knisely

Name (Printed or typed)

6452 Cropping St. Apt 4214

Address

Winter Garden, FL 34787

City, State & Zip

407-625-8155

Daytime Telephone number

dknisely@cfl.rr.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: 2DaysProduct Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
6452 Cropping St
Apt 4214
Winter Garden, FL 34787

Mailing address, if different is:

Same

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any Legal and Lawful Trade

FILED
11 FEB - 3 AM 11:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE IV SHARES

The number of shares of stock is: 100,000 (One Hundred Thousand)

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Douglas H Knisely, President & CEO
Address: 6452 Cropping St
Apt 4214
Winter Garden, FL 34787

Name and Title: _____
Address: _____

Name and Title: Douglas H Knisely, Secretary
Address: 6452 Cropping St
Apt 4214
Winter Garden, FL 34787

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: Douglas H Knisely
Address: 6452 Cropping St Apt 4214
Winter Garden, FL 34787

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Douglas H Knisely
Address: 6452 Cropping St Apt 4214
Winter Garden, FL 34787

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

01/29/2011

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

01/29/2011

Date