

1000019827

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H11000052533 3)))



H11000052533ABCU

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

FLORIDA PROFIT/NON PROFIT CORPORATION
SQUARE EDGE INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

2011 FEB 28 AM 10:28
FILED
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

J. Sten MAR 01 2011

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: Square Edge Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address: 938 Windward Way
Weston FL 33327
Mailing address, if different is: _____

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
to transact any and all lawful purposes for which a corporation may be formed

ARTICLE IV SHARES
The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: <u>Glenn Fidge (Director)</u>	Name and Title: _____
Address: <u>938 Windward Way</u>	Address: _____
<u>Weston FL 33327</u>	_____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____

ARTICLE VI REGISTERED AGENT
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:
Name: Glenn Fidge
Address: 938 Windward Way
Weston FL 33327

ARTICLE VII INCORPORATOR
The name and address of the incorporator is:
Name: Glenn Fidge
Address: 938 Windward Way
Weston FL 33327

Having been called 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] _____ Feb 27 2011
Required Signature/Registered Agent Date

I submit this document and certify 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. 817.133, F.S.

[Signature] _____ Feb 27 2011
Required Signature/Incorporator Date

2011 FEB 28 AM 10:28
CLERK OF THE COUNTY OF
ALACHUA FLORIDA

FILED