

P110000 22032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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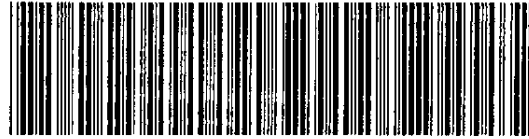
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 03/07/11

COVER LETTER

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

SUBJECT: GLOBAL STRIDES INCORPORATION

(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: ABIOLA OLAYINKA SOGAOLU

Name (Printed or typed)

21462 NW 40 CIRCLE COURT

Address

MIAMI GARDENS, FL 33055

City, State & Zip

786-308-6702

Daytime Telephone number

biolasogaolu@yahoo.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: GLOBAL STRIDES INCORPORATION

ARTICLE II PRINCIPAL OFFICE

Principal street address
21462 NW 40 CIRCLE COURT
MIAMI GARDENS, FL 33055

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This corporation may engage in or transact any and all lawful activities or business permitted under the laws of the United States, the State of FLORIDA, or any other state, county, territory or nation.

ARTICLE IV SHARES

The number of shares of stock is: 50,000 Ordinary shares at \$1.00 Each

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: OLUWATOYIN LADITAN (DIRECTOR)
Address: 21462 NW 40 CIRCLE COURT
MIAMI GARDENS, FL 33055

Name and Title: _____
Address: _____

Name and Title: ABIOLA OLAYINKA SOGAOLU (DIR)
Address: 21462 NW 40 CIRCLE COURT
MIAMI GARDENS, FL 33055

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: FEMI OGUNMOLA
Address: 99 NW 183RD ST STE 130-B
MIAMI GARDENS, FL 33055

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: ABIOLA OLAYINKA SOGAOLU
Address: 21462 NW 40 CIRCLE COURT
MIAMI GARDENS, FL 33055

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

2/24/2011

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.

Abiola Olayinka Sogaolu
Required Signature/Incorporator

2/24/2011

Date