

P11000023521

(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



700193726747

02/11/11--01014--013 **78.75

FILED
11 MAR -4 AM 8:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRS
3/10

111-8750

COVER LETTER

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

SUBJECT: **SEEBASS 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: **SEBASTIAN MALDONADO**

Name (Printed or typed)

2871 SUNRISE LAKES DR. E #204

Address

SUNRISE, FL 33322

City, State & Zip

954-868-3983

Daytime Telephone number

SABB0305@GMAIL.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 14, 2011

SEBASTIAN MALDONADO
2041 SUNRISE LAKES DR. E
SUNRISE, FL 33322

SUBJECT: SAB INC.
Ref. Number: W11000008750

We have received your document for SAB INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap
Regulatory Specialist II
New Filing Section

Letter Number: 311A00003773

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

03/01/2011

Attn: Ruby

I was on the Sunbiz.org website and realized my corporation was rejected. I was instructed to write to you for a 2nd request. I have chosen a new name and made sure that nobody else has it. It was my fault for not checking the first time I did this. For that I apologize. I also realized that the address on the first rejection was wrong. Not a big deal, that's probably why I never received the rejection letter (if you sent one). My correct address is: **2871 Sunrise Lakes Dr. E #204**

Sunrise, FL 33322

I hope this time around, everything goes much smoother. If you have any questions feel free to email me or call me at **954-868-3983. Thank You**

Sebastian Maldonado

RECEIVED MAR - 14 2011

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME **SEEBASS INC.**

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
2871 SUNRISE LAKES DR E #204
SUNRISE, FL 33322

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
PET SUPPLIES & EQUIPMENT

ARTICLE IV SHARES

The number of shares of stock is: **1000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: SEBASTIAN MALDONADO (PRES)	Name and Title: _____
Address: <u>2871 SUNRISE LAKES DR E. #204</u>	Address: _____
<u>SUNRISE, FL 33322</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:

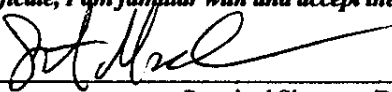
Name: **SEBASTIAN MALDONADO**
Address: 2871 SUNRISE LAKES DR E #204
SUNRISE, FL 33322

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **SEBASTIAN MALDONADO**
Address: 2871 SUNRISE LAKES DR E #204
SUNRISE, FL 33322

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

03/01/2011

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

03/01/2011

Date

FILED
11 MAR -4 AM 8:19
SECRETARY OF STATE
TALLAHASSEE FLORIDA