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(Requestor's Name)

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(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

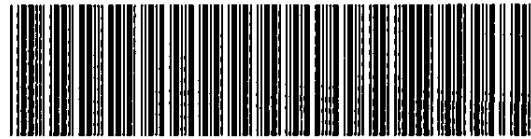
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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44-11

**COVER LETTER**

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

**SUBJECT:** Happy Life Solutions, 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:** David Meier

Name (Printed or typed)

15030 SW 88 Lane

Address

Miami, Fl. 33196-1307

City, State & Zip

305-385-1234

Daytime Telephone number

dm@firelandtv.com

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

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**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: Happy Life Solutions, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
15030 SW 88 Lane  
Miami, Fl. 33196-1307

Mailing address, if different is:  
15030 SW 88 Lane  
Miami, Fl. 33196-1307

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

The purpose of this corporation is to conduct business in the state of Florida without any limitations and/or growth potential.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000 shares

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: David Meier  
Address: President  
15030 SW 88 Lane  
Miami, Fl. 33196-1307

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
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Name and Title: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
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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: Angel Trejo  
Address: 13727 SW 152nd Street #375  
Miami, Fl 33177

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: David Meier  
Address: 15030 SW 88 Lane  
Miami, Fl. 33196-1307

*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

3/31/2011

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

3/31/2011

Date

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