

P110000038013

(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



000197650980

03/16/11--01018--011 **78.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 APR 19 PM 1:09

APPROVED
AND
FILED

4/20
SF

W11000015

COVER LETTER

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

SUBJECT: **Spend Smart 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: **Juslene Isnor**

Name (Printed or typed)

3521 N.W 8 Ave

Address

Pompano Beach Florida 33064

City, State & Zip

954-297-2438

Daytime Telephone number

Jyourboy12@yahoo.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

RECEIVED
11 APR 19 PM 2:26
DIVISION OF CORPORATIONS

March 30, 2011

JUSLENE ISNOR
295 NE 44 CT.
POMPANO BEACH, FL 33064

SUBJECT: SHOP 4 LESS INC.
Ref. Number: W11000015762

We have received your document for SHOP 4 LESS 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.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Please return 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) 245-6995.

Jessica A Fason
Regulatory Specialist II

Letter Number: 011A00006696

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

ARTICLE I NAME Spend Smart Inc
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE
Principal street address
3521 N.W 8 Ave
Pompano Beach Florida 33064

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Store will be selling new clothing and about 80% off new merchandise and 20% off mixed and used general merchandise and overstock merchandise

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: _____	Name and Title: _____
Address: _____	Address: _____
_____	_____
_____	_____
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: Juslene Isnor
Address: 295 N E 44ct
Pompano Beach Florida 33064

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Juslene Isnor
Address: 295 N E 44ct
Pompano Beach Florida 33064

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

Juslene Isnor
Required Signature/Registered Agent

4-11-11
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.

Juslene Isnor
Required Signature/Incorporator

4-11-11
Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11 APR 19 PM 1:09

APPROVED
AND
FILED