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MRS
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COVER LETTER

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

FILED
11 APR 22 AM 8:05
SECRETARY OF STATE
TALLAHASSEE FLORIDA

SUBJECT: **THREE S PROPERTIES, 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: Incorporating Services, Ltd. - Melissa

Name (Printed or typed)

Address

Tallahassee, FL 32301

City, State & Zip

656-7956

Daytime Telephone number

mstops@incserv.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

THREE S PROPERTIES, INC

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
5447 Villawood Circle
Calabasas, CA 91302

Mailing address, if different is:
5447 Villawood Circle
Calabasas, CA 91302

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Any lawful activity.

ARTICLE IV SHARES

The number of shares of stock is: 1,500

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ryan Guiao, President/Director
Address: 5447 Villawood Circle
Calabasas, CA 91302

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: Incorporating Services, Ltd.
Address: 1540 Glenway Drive
Tallahassee, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Incorporating Services, Ltd.
Address: 1540 Glenway Drive
Tallahassee, FL 32301

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

Melissa A. Styp, Asst. Secretary
Required Signature/Registered Agent

4/22/2011
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.

Melissa A. Styp, Asst. Secretary
Required Signature/Incorporator

4/22/2011
Date

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SECRETARY OF STATE
TALLAHASSEE FLORIDA