

P110000042423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

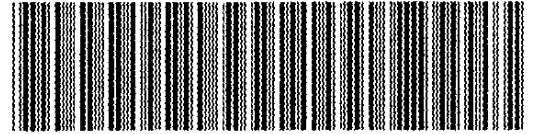
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/29/11--01022--021 **78.75

2011 MAY -2 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SC s/:

COVER LETTER

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

SUBJECT: MY SOLIDGROUND 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: RIMA SHIURNA

Name (Printed or typed)

30 PORPOISE LANE

Address

PALM COAST, FL 32164

City, State & Zip

386 586 2949

Daytime Telephone number

RSHIURNA@HOTMAIL.COM ✓

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY -2 PM 2:30

FILED

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: **MY SOLIDGROUND INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
30 PORPOISE LANE
PALM COAST, FL 32164

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
TO FORM A PROFESSIONAL CORPORATION AND HIRE EMPLOYEES

ARTICLE IV SHARES

The number of shares of stock is: **100**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **RIMA SHIURNA PRESIDENT**
Address: **30 PORPOISE LANE**
PALM COAST, FL 32164

Name and Title: _____
Address: _____

Name and Title: **RAMUNAS SHIURNA**
Address: **30 PORPOISE LANE**
PALM COAST, FL 32164

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: **RIMA SHIURNA**
Address: **30 PORPOISE LANE**
PALM COAST, FL 32164

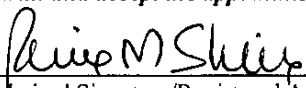
ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **RIMA SHIURNA**
Address: **30 PORPOISE LANE**
PALM COAST, FL 32164

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2011 MAY -2 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FL 32304

Having been named as registered agent to accept service of process for the above stated corporation at the place designated, this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

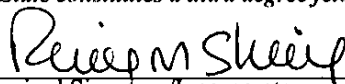


Required Signature/Registered Agent

04/21/2011

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Required Signature/Incorporator

04/21/2011

Date