

P11200046018

(Requestor's Name)

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(City/State/Zip/Phone #)

☐ PICK-UP

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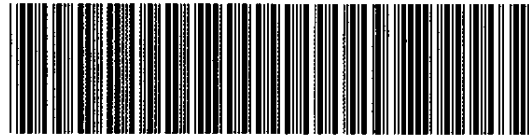
(Business Entity Name)

(Document Number)

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

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FILED  
11 MAY 12 PM 1:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PS 5/13/11

## COVER LETTER

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

SUBJECT: LUCKY HEAD 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: Bernard Lorenzo Frazier Jr.

Name (Printed or typed)

207 Foxtail Drive Unit A3

Address

Greenacres, FL 33415

City, State & Zip

305-495-9490

Daytime Telephone number

luckyhead@ymail.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**

The name of the corporation shall be: Lucky Head Inc.

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
207 Foxtail Drive Unit A3  
Greenacres, FL  
33415

Mailing address, if different is: DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
To produce and sell natural products.

**ARTICLE IV SHARES**

The number of shares of stock is: 1

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

Name and Title: <u>Bernard L. Frazier Jr. - CEO/Owner</u>	Name and Title: _____
Address: <u>207 Foxtail Drive Unit A3</u>	Address: _____
<u>Greenacres, FL</u>	_____
<u>33415</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: Bernard L. Frazier Jr.  
Address: 207 Foxtail Drive Unit A3  
Greenacres, FL 33415

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Bernard L. Frazier Jr.  
Address: 207 Foxtail Drive Unit A3  
Greenacres, FL 33415

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

Bernard L. Frazier Jr.  
Required Signature/Registered Agent

5/3/11  
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.

Bernard L. Frazier Jr.  
Required Signature/Incorporator

5/3/11  
Date