

P110000047553

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

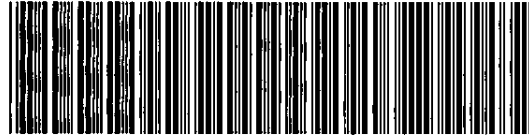
Ronald G. ISAACSON VE

AUTHORIZATION BY FILE TO
CORRECT Write in Entity on Application

DATE 5-20-11

DOC. EXAM S. Collins

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2011 MAY 18 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SC
5-20-11

COVER LETTER

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

SUBJECT: SPACE MAN CONSULTING 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: RONALD G ISAACSON

Name (Printed or typed)

7463 NW 124TH AVE.

Address

PARKLAND, FLORIDA, 33076

City, State & Zip

312 343 4367

Daytime Telephone number

RONISAACSON@ME.COM

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 18 PM 2:30

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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**SPACE MAN CONSULTING INC.**

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICEPrincipal street address
7463 NW 124TH AVE.
PARKLAND, FLORIDA, 33076

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

BUSINESS AND MARKETING CONSULTING**ARTICLE IV SHARES**

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: **RONALD ISAACSON - PRESIDENT**Address: **7463 NW 124TH AVE.
PARKLAND, FLORIDA, 33076**

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: **RONALD ISAACSON**Address: **7463 NW 124TH AVE.
PARKLAND, FLORIDA, 33076****ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: **RONALD ISAACSON**Address: **7463 NW 124TH AVE.
PARKLAND, FLORIDA, 33076**

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

Required Signature/Registered Agent

05-18-2011

Date

I, _____, do hereby certify that this document to the Department of State constitutes a third degree _____ aware that the false information submitted in a _____ for in s.817.155, F.S.

Required Signature/Incorporator

05-18-2011

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA