

P11000093203

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

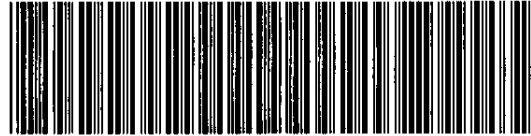
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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2011 JUN -6 AM 10:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Stivers JUN 07 2011

## COVER LETTER

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

**SUBJECT:**

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

the Documint, Inc.

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:

Joseph Goldglantz  
Name (Printed or typed)

20401 NE 30 Ave #3  
Address

Aventura, FL 33180  
City, State & Zip

954 647-0021  
Daytime Telephone number

JBGoldglantz@gmail.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

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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** the Documint, incorporated

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

20401 NE 30th Ave #322  
Aventura, FL 33180

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To assist companies in going paperless. Organizing documents through scanning, archiving, OCR, web-based storage, and other services.

**ARTICLE IV SHARES** 100

The number of shares of stock is

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

Name and Title:  
Address: Owner & CEO, Joseph Goldqlantz  
20401 NE 30th Ave #322  
Aventura, FL 33180

Name and Title: Vice President, Miriam Goldqlantz  
Address: 20401 NE 30th Ave #322  
Aventura, FL 33180

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:

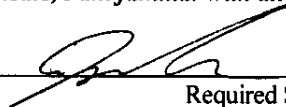
Name: Joseph Goldqlantz  
Address: 20401 NE 30th Ave #322  
Aventura, FL 33180

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Joseph Goldqlantz  
Address: 20401 NE 30th Ave #322  
Aventura, FL 33180

*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*



Required Signature/Registered Agent

06/02/11

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.*



Required Signature/Incorporator

06/02/11

Date

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