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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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7/26

## COVER LETTER

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

SUBJECT: **Snap2 Franchise Corporation**

(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: **Brian R. Frazier**

Name (Printed or typed)

**9802 Baymeadows Road, Ste. 12**

Address

**Jacksonville, FL 32256**

City, State & Zip

**904-645-9301**

Daytime Telephone number

**snap2fc@gmail.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**

Snap2 Franchise Corporation

The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Snap2 Franchise Corporation  
9802 Baymeadows Road, Ste. 12  
Jacksonville, FL 32256

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business.

**ARTICLE IV SHARES**

The number of shares of stock is: 1000

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

Name and Title: Brian R. Frazier, President/Treasurer  
Address: 4849 Philrose Drive  
Jacksonville, FL 32217

Name and Title: Dennis J. Moats, Vice President/Secretary  
Address: 13959 Captain Hook Drive, N.  
Jacksonville, FL 32224

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: Francis M. Boyer, Esq.  
Address: 9471 Baymeadows Road, Ste. 404  
Jacksonville, FL 32256

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Brian R. Frazier  
Address: 9802 Baymeadows Road, Ste. 12  
Jacksonville, FL 32256

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

Boyer  
Required Signature/Registered Agent

July 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 a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Brian R. Frazier  
Required Signature/Incorporator

July 21, 2011  
Date

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11 JUL 25 PM 1:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA