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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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8/2/11

## COVER LETTER

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

SUBJECT: Higher Fidelity Sales Associates of Florida 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: Dennis Hardy

Name (Printed or typed)

10186 Breezeway Place

Address

Boca Raton, Fl. 33428

City, State & Zip

954-646-0377

Daytime Telephone number

higherfidelity@bellsouth.net

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

2011 AUG - 1 PM 1:24

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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 name of the corporation shall be: **Higher Fidelity Sales Associates of Florida inc.**

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
**20423 State Road 7**  
**Suite F6517**  
**Boca Raton, FL 33498**

2011 AUG -1 PM 1:24  
Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
**Manufacturers sales representatives**

**ARTICLE IV SHARES**

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

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

Name and Title: **Dennis Hardy President**  
Address: **10186 Breezeway Place**  
**Boca Raton, FL 33428**

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: **Dennis Hardy**  
Address: **10186 Breezeway Place**  
**Boca Raton, FL 33428**

**ARTICLE VII INCORPORATOR**

The **name and address** of the Incorporator is:

Name: **Dennis Hardy**  
Address: **10186 Breezeway Place**  
**Boca Raton, FL 33428**

*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

**7/29/2011**

\_\_\_\_\_  
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.*

\_\_\_\_\_  
Required Signature/Incorporator

**7/29/2011**

\_\_\_\_\_  
Date