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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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DIVISION OF CORPORATIONS

Ps 9/1/11

COVER LETTER

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

SUBJECT: SMUDGE CONSULTIN	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	cles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status
	ADDITIONAL COPY REQUIRED
FROM: Milana Myers Name	(Printed or typed)
1615 Needle Palm Drive	ddress
Edgewater, Florida 321	
386-316-3366 Daytime Te	lephone number
MilanaMyers@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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME SMITH CONSULTING INC			DIVISION OF CORPORATION		
	NAME SMUDGE CONSULTING, orporation shall be:	INC.	11 AUG 31		
ARTICLE II	PRINCIPAL OFFICE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	MITTU- 31	
	Principal street address	Mailing addr	ess, if different is:		
	1615 Needle Palm Drive		· · · · · · · ·		
<u>.</u>	Edgewater, Florida 32132				
ARTICLE III	PURPOSE				
The purpose for w	hich the corporation is organized is:				
Debt Collection	on				
ARTICLE IV	CHARRO				
The number of shar	res of stock isOne (100) Hundred Shares				
	INITIAL OFFICERS AND/OR DIRECTORS				
Name and Ti Address:	itle: Milana Myers, President	Name and Title:			
Audress:	1615 Needle Palm Drive			·-	
	Eugewater, Florida 32132				
Name and Ti	itle:1	Name and Title:			
Address:		Address:			
				<u></u>	
Name and Ti Address:	itle:1	Name and Title:			
ragicss.					
					
	REGISTERED AGENT				
he <u>name and Flo</u> Name:	rida street address (P.O. Box NOT acceptable) of the Milana Myers, President	e registered agent is:			
Address:	1615 Needle Palm Drive				
3344.000.	Edgewater, Florida 32132				
ARTICLE VII	INCORPORATOR				
	Iress of the Incorporator is:				
Name:	Milana Myers				
Address:	1615 Needle Palm Drive Edgewater, Florida 32132				
	ed as registered agent to accept service of process fo n familiar with and accept the appointment as registe			ignated in	
his	could a now		luk 20 2011		
1111	Required Signature/Registered Agent		July 28, 2011 Date		
	ment and affirm that the facts stated Herein are tri epartment of State constitutes a third degree felony as			utted in a	
7.	· Na a kaisa)			
\overline{N}	War a Will	<u>V)</u>	July 28, 2011		
	Required Signature/Incorporator		Date	_	