

PI1000077586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

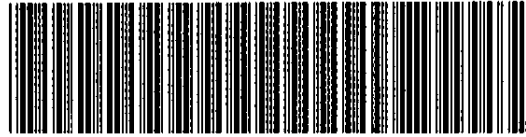
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



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08/31/11--01006--012 \*\*70.00

FILED  
AND  
APPROVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
FRI AUG 31 PM 12:59

FILED  
AND  
APPROVED

1/4

## COVER LETTER

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

SUBJECT: SyncYourFactSheet, 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: Robert Allen

Name (Printed or typed)

PO Box 851

Address

Vero Beach, FL 32961

City, State & Zip

772-713-0450

Daytime Telephone number

RobertAllenVeroBeach@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)

APPROVED  
AND  
FILED

**ARTICLE I NAME** SyncYourFactSheet, Inc.  
The name of the corporation shall be:

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**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
2125 43rd Ave  
Vero Beach, FL 32960

Mailing address, if different  
PO Box 851  
Vero Beach, FL 32961

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

This corporation is organized to protect the stakeholders, to ensure the longevity of our services to our customers, and to make the world a better place.

**ARTICLE IV SHARES**

The number of shares of stock is: 1,000,000

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

|  |                       |
|--|-----------------------|
| Name and Title: <u>Robert Allen, Chief Executive Officer</u> | Name and Title: _____ |
| Address: <u>PO Box 851</u>                                   | Address: _____        |
| <u>Vero Beach, FL 32961</u>                                  | _____                 |
| _____  | _____                 |

|                       |                       |
|-----------------------|-----------------------|
| Name and Title: _____ | Name and Title: _____ |
| Address: _____        | Address: _____        |
| _____                 | _____                 |
| _____                 | _____                 |

|                       |                       |
|-----------------------|-----------------------|
| Name and Title: _____ | Name and Title: _____ |
| Address: _____        | Address: _____        |
| _____                 | _____                 |
| _____                 | _____                 |

**ARTICLE VI REGISTERED AGENT**

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

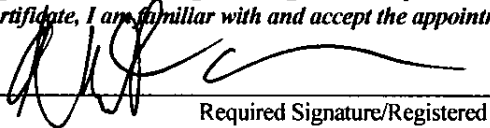
Name: Robert Allen  
Address: 2125 43rd Ave  
Vero Beach, FL 32961

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

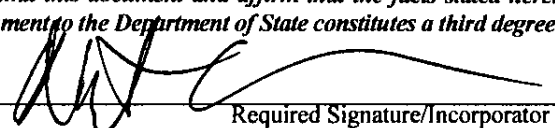
Name: Robert Allen  
Address: 2125 43rd Ave  
Vero Beach, FL 32961

*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

August 10, 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

August 10, 2011  
\_\_\_\_\_  
Date