

P11000105247

(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:

~~W1-600100~~

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11/28/11--01015--003 **70.00

11 DEC -9 PM 3:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

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

SUBJECT: A Plus Subscriptions, 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: Latoya Williams
Name (Printed or typed)

1077 Washington Cir Suite E
Address

Homestead, FL 33034
City, State & Zip

786-379-2441
Daytime Telephone number

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

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 30, 2011

LATOYA WILLIAMS
1077 WASHINGTON CIR SUITE E
HOMESTEAD, FL 33034

SUBJECT: A PLUS SUBSCRIPTIONS, INC.
Ref. Number: W11000060010

We have received your document for A PLUS SUBSCRIPTIONS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the name of the corporation in Article I.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6962.

Valerie Herring
Regulatory Specialist II
New Filing Section

Letter Number: 011A00026805

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: A PLUS SUBSCRIPTIONS, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
1077 Washington Cir Ste E
Homestead, FL 33034

Mailing address, if different is:

P.O. Box 971415

Miami, FL ~~33197~~

33197

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Selling Magazines

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Latoya Williams Director
Address: 1077 Washington Cir
Homestead, FL 33034

Name and Title: _____

Address: _____

Name and Title: _____
Address: _____

Name and Title: _____

Address: _____

Name and Title: _____
Address: _____

Name and Title: _____

Address: _____

11 DEC 19 4 11:35 PM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

477415
FILED

ARTICLE VI REGISTERED AGENT

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

Name: Latoya Williams
Address: 1077 Washington Cir
Homestead, FL 33034

ARTICLE VII INCORPORATOR

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

Name: Latoya Williams
Address: 1077 Washington Cir
Homestead, FL 33034

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

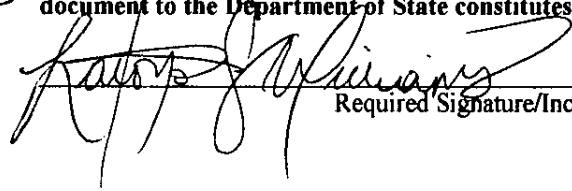


Required Signature/Registered Agent

11/19/2011

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

11/18/2011

Date