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

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COVER LETTER

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

SUBJECT:			INC.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	DE SUFFIX)		
Enclosed are an o	riginal and one (1) copy of the arti	cles of incorporation and	a check for:		
\$70.00 Filing Fed	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of		
Paid		ADDITIONAL CO	Status PY REQUIRED		
FROM:	DOUGLAS F	?. Littel	L_		
Name (Printed or typed)					
20045 OCEAN CURVE DR. Address					
CUTLER BAY, FL 33189					
	City, State & Zip				

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

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

onlyzbest @ yahoo.com

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12 FEB -8 AM 10: 52

SECRETARY OF STATE
FLORIDA DEPARTMENT OF STATE ALLAHASSEE. FLORIDA
Division of Corporations

January 11, 2012

DOUGLAS REINTELL 20045 OCEAN CURVE DRIVE CUTLER BAY, FL 33189

SUBJECT: SIMPLY Z BEST, INC. Ref. Number: W12000002029

We have received your document for SIMPLY Z BEST, INC. and your check(s) totaling \$78.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and ot acceptable for imaging. We ask that you type or carefully print the information in the appropriate blocks.

Please list the street address of each officer/director.

You must list at least one incorporator with a complete business street address.

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) 245-6973.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 312A00000786

12 FEB -8 PH 2: 04

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

FILED NS

The name of the corpor	AME Simply	Z Best, Inc.	DIVISION OF CORPORATION
•	RINCIPAL OFFICE		12 FEB -8 PH 2: 04
<u>20</u>	Principal street address 0045 OCEAN CURV TLER BAY FL 33	E DR.	address, if different is:
ARTICLE III PU		CONTRACTING	7
ARTICLE IV SF The number of shares of	HARES 1,000		
Name and Title: Address:	ITIAL OFFICERS AND/OR DI DOUGLAS R. LI 20045 OCEAN CURVE CUTLER BAY, FL	Name and Title: Address:	
Name and Title: Address:			
Name and Title: Address:			
	EGISTERED AGENT a street address (P.O. Box NOT acc	y	
Address:	CUTLER BAY, FL		
	CORPORATOR So of the Incorporator is: DOUGLAS R. L. 2.0045 OCEAN CUTLER BAY, FL	ITTELL CURVE DR. 33189	
		e of process for the above stated cor nent as registered agent and agree to	
	Required Signature/Registe/ed		1-5-12

Required Signature/Incorporator