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· (Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	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: Qual Pak Solutions, Inc.).
(PROPOSED CORPORAT	FE 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
	ADDITIONAL COPY REQUIRED
FROM: Christopher M. Parker	
Name	(Printed or typed)
5035 Palm Drive	address
Melbourne Beach, FL 32	2951-3204 State & Zip
321-261-8491 Daytime Te	elephone number
cparker305@hotmail.con E-mail address: (to be used	n for future annual report notification)

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

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

RTICLE II P	RINCIPAL OFFICE			10.1100
50	Principal street address	N	/failing addre	ss, if different is:
	35 Palm Drive			
ME	lbourne Beach, FL 32951-3204	-		
		-	· · ·	
RTICLE III P				
	ch the corporation is organized is:			
Packaging sen	/ices			
RTICLE IV S ne number of shares				
	NITIAL OFFICERS AND/OR DIRECTOR			
	:Christopher M. Parker, President			
Address:	5035 Palm Drive			
	Melbourne Beach, FL 32951-3204	-		
		-	 	
Name and Title	2			
Address:		_ Address:		
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Name and Title	e:	Name and Title:		•
Address:				
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	EGISTERED AGENT	Cales massistemed assembly	+ !a.	
ie <u>name and Floru</u> Name:	ia street address (P.O. Box NOT acceptable) of Christopher M. Parker		t is:	ω
Address:	5035 Palm Drive	_		
11001055.	Melbourne Beach, FL 32951-320	4		5 3
	•	-		6
	NCORPORATOR			O #
	ess of the Incorporator is:			* 2
Name: Address:	Christopher M. Parker			
Address.	5035 Palm Drive Melbourne Beach, FL 32951-3204	-		
	THORDONIC DESCRIPTION OF THE SECOND	ı		
	as registered agent to accept service of proces. familiar with and accept the appointment as reg			
	M. D. L.			2-10-12
	" fare			
Chutoph	Required Signature/Registered Agent	· · · · · · · · · · · · · · · · · · ·		Date

Required Signature/Incorporator

Date