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SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 FEB 20 PM 1:07

2/21/12

COVER LETTER

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

SUBJECT: SoftIntro, 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: H. WILLIAM LARSON, ESQ.

Name (Printed or typed)

11199 69TH STREET N.

Address

LARGO, FL 33773

City, State & Zip

727-546-0660

Daytime Telephone number

BILL@LARSONPATENTLAW.COM

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

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

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12 FEB 20 PM 1:07

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 SoftIntro, Inc.
The name of the corporation shall be:

12 FEB 20 PM 1:07

ARTICLE II PRINCIPAL OFFICE
Principal ~~street~~ address
441 20th Avenue N.
Indian Rocks Beach, FL
33785

Mailing address, if different is:

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Any and all lawful business

ARTICLE IV SHARES
The number of shares of stock is: 10,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

| | |
|--|-----------------------|
| Name and Title: Victor Guzman, President | Name and Title: _____ |
| Address: 10633 92nd Street | Address: _____ |
| Largo, FL | _____ |
| 33777 | _____ |

| | |
|---|-----------------------|
| Name and Title: Tom Strong, Secretary & Treasurer | Name and Title: _____ |
| Address: 441 20th Avenue N. | Address: _____ |
| Indian Rocks Beach, FL | _____ |
| 33785 | _____ |

| | |
|-----------------------|-----------------------|
| 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: Victor Guzman
Address: 10633 92nd Street
Largo, FL 33777

ARTICLE VII INCORPORATOR

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

Name: H. William Larson, Esq.
Address: 11199 69th Street N.
Largo, FL 33773

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

Victor Guzman
Required Signature/Registered Agent

Feb 16, 2012
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.

H. William Larson
Required Signature/Incorporator

2-16-12
Date