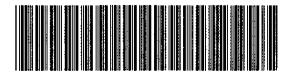
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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only

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COVER LETTER

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

SUBJECT: SAMSSON DELIVERY 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 \$78.75 Filing Fee & Certificate of Status \$78.75 \$87.50 Filing Fee & Certified Copy & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED				
FROM: BRADLEY L. SMITH Name (Printed or typed)				
Name (Printed or typed) 4041 Jour BRIER DR Address	12 FEB	SECRE		
Fr. MYERS, FL 33905 City, State & Zip	3 27 PH	BOO SO BOOKE TO A STATE OF COME		
352- 438- 4959 Daytime Telephone number	f 4: 15	STATE		
E-mail address: (to be used for future annual report notification)		35		

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



February 21, 2012

BRADLEY L. SMITH 4041 WOODBRIER DRIVE FORT MYERS, FL 33905

SUBJECT: SAMSSON DELIVERS INC.

Ref. Number: W12000010153

We have received your document for SAMSSON DELIVERS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a <u>signed</u> statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

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

The registered agent must sign accepting the designation.

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) 245-6052.

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 412A00007577

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

The name of the corporation shall be:	n5500 Deliv	IERS LIVE.		
ARTICLE II PRINCIPAL OFFICE 4044 WOODB	TER DR 4 33305 E	O Mailing address, if different is: OR T.MYERS, FL 33905		
ARTICLE III PURPOSE The purpose for which the corporation is orga O MAKE DELIVER	nized is: CES FOR A 'FOR P	POFIT' COMPANY		
ARTICLE IV SHARES The number of shares of stock is: /00				
Name and Title: SRADLEY SMITAL OFFICERS AND Address: 4041 WXXDF		Title:		
Name and Title: Address:	Name and Address:	Title:		
Name and Title:Address:	Name and Address:	Title:		
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Bo Name: Bradley S Address: 4041 11000 Fort Mye	mith	PA CASE		
ARTICLE VII INCORPORATOR The name and address of the Incorporator is: Name: Bradley Address: Hoyl Wood	odbrier Dr s, F1 33905	GRATIONS 4: 15		
Having been named as registered agent to accept this certificate. I am familiar with and accept the		re stated corporation at the place designated in and agree to act in this capacity		
Required Signature/	Registered Agent			
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.				
7/25	ellacormorator	2/8/12		