

P12000027181

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

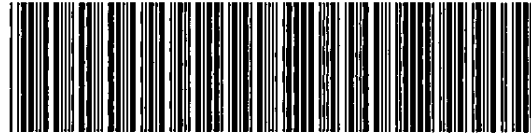
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600224857386

03/19/12--01044--011 **78.75

FILED

12 MAR 19 PM 1:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRD
3/20/12

COVER LETTER

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

SUBJECT: NATIONWIDE SERVICE OF PROCESS CORPORATION
(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: NICOLE CHRISTOPHER
Name (Printed or typed)
100 SOUTH DIXIE, SUITE 200
Address
WEST PALM, FL 33401
City, State & Zip
617-777-7836
Daytime Telephone number
N0624C @ YAHOO.COM
E-mail address: (to be used for future annual report notification)

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

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: NATIONWIDE SERVICE OF PROCESS CORPORATION

ARTICLE II. PRINCIPAL OFFICE

Principal street address

100 SOUTH DIXIE, SUITE 200
WEST PALM, FL 33401

Mailing address, if different is:

ARTICLE III. PURPOSE

The purpose for which the corporation is organized is:

TO PROVIDE SERVICE OF PROCESS SERVICES

ARTICLE IV. SHARES

The number of shares of stock is: 100

ARTICLE V. INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NICOLE CHRISTOPHER, President

Address: 100 SOUTH DIXIE, SUITE 200
WEST PALM, FL 33401

Name and Title: NICOLE CHRISTOPHER, Director

Address: 100 SOUTH DIXIE, SUITE 200
WEST PALM FL 33401

Name and Title: NICOLE CHRISTOPHER, Secretary

Address: 100 SOUTH DIXIE, SUITE 200
WEST PALM, FL 33401

Name and Title: NICOLE CHRISTOPHER, Treasurer

Address: 100 SOUTH DIXIE, SUITE 200
WEST PALM FL 33401

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI. REGISTERED AGENT

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

Name: NICOLE CHRISTOPHER

Address: 100 SOUTH DIXIE, SUITE 200
WEST PALM, FL 33401

ARTICLE VII. INCORPORATOR

The name and address of the Incorporator is:

Name: NICOLE CHRISTOPHER

Address: 100 SOUTH DIXIE SUITE 200
WEST PALM, FL 33401

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

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/Registered Agent

Date

NICOLE CHRISTOPHER

3-16-12