

P12000030817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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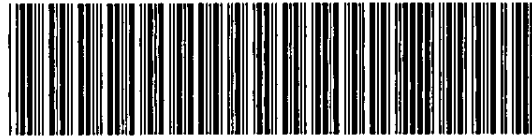
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
12 MAR 29 PM 3:26
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MRS
3/30/12

COVER LETTER

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

SUBJECT: She Surveys 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: Kimberly Danielle Solitro

Name (Printed or typed)

405 Shelby Court

Address

Apopka, FL 32712

City, State & Zip

(407) 927-6064

Daytime Telephone number

ksolitro@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)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the corporation shall be: She Surveys Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address
405 Shelby Court
Apopka, FL 32716

Mailing address, if different is:
P.O. Box 162595
Altamonte Springs, FL 32716

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

To engage in any activity or business permitted under the laws of the United States of America in the state of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kimberly Solitro, President
Address: 405 Shelby Court
Apopka, FL 32712

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

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: Kimberly Solitro
Address: 405 Shelby Court
Apopka, FL 32712

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kimberly Solitro
Address: 405 Shelby Court
Apopka, FL 32712

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

Kimberly Solitro
Required Signature/Registered Agent

3/26/12
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.

Kimberly Solitro
Required Signature/Incorporator

3/26/12
Date