

PI2000039422

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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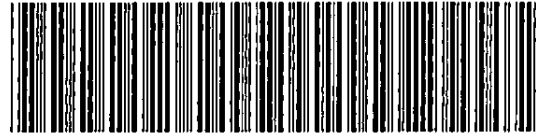
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
12 APR 27 PM 12:46
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
12 APR 27 PM 12:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

VKT

COVER LETTER

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

SUBJECT: Copalivin Company
(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: Jason Smith
Name (Printed or typed)

4201 Westgate Avenue, Suite A-11
Address

West Palm Beach, FL, 33409
City, State & Zip

Daytime Telephone number

info@copalivin.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: Copalivin Company

ARTICLE II PRINCIPAL OFFICE

Principal street address

4201 Westgate Avenue, A-11

WPB, FL, 33409

Mailing address, if different is: _____

FILED

12 APR 27 PM 12:51

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Graphic Design company.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jason Smith (CEO)

Address: 4201 Westgate Avenue, A-11

WPB, FL, 33409

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: Jason Smith

Address: 4201 Westgate Avenue, A-11

WPB, FL, 33409

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jason Smith

Address: 4201 Westgate Avenue, A-11

WPB, FL, 33409

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

Jason Smith
Required Signature/Registered Agent

4-27-12

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.

Jason Smith
Required Signature/Incorporator

4-27-12

Date