

P120000 53820

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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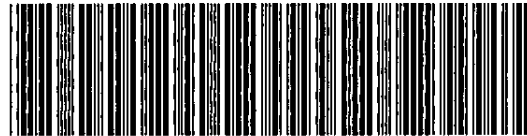
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2012 JUN 13 AM 9:54
TOLSON

J. Stowers JUN 13 2012

COVER LETTER

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

SUBJECT: Bestofficeonline 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: James Andersen
Name (Printed or typed)

19821 NW 2nd Ave #131
Address

Miami Gardens, FL 33169
City, State & Zip

305-653-1924
Daytime Telephone number

ja@bestofficesupplyonline.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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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:

Best Office on-line Corporation

ARTICLE II PRINCIPAL OFFICE

Principal street address

*19821 NW 2nd Ave #131
Miami Gardens, FL 33169*

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Retail Sales

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: *Kenneth Bongsoy Vice President*

Address: *19821 NW 2nd Ave #131
Miami Gardens, FL 33169*

Name and Title:

Address:

Name and Title: *Josey Seide President/CEO*

Address: *19821 NW 2nd Ave #131
Miami Gardens, FL 33169*

Name and Title:

Address:

Name and Title: *Dominique Witherspoon Vice President*

Address: *19821 NW 2nd Ave #131
Miami Gardens, FL 33169*

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: *James Andersen*
Address: *19821 NW 2nd Ave #131
Miami Gardens, FL 33169*

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: *James Andersen*
Address: *19821 NW 2nd Ave #131
Miami Gardens, FL 33169*

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

James Andersen

Required Signature/Registered Agent

06-12-2012

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.

James Andersen

Required Signature/Incorporator

06-12-2012

Date

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