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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUN 25 AM 11:02

FILED

1/4

## COVER LETTER

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

SUBJECT: Providence 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: Winston Smith  
Name (Printed or typed)

604 Coconut Ave  
Address

Port Saint Lucie, FL 34952  
City, State & Zip

(772) 237 4548  
Daytime Telephone number

winston.008@comcast.net  
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 25, 2012

WINSTON SMITH  
604 COCONUT AVE  
PORT SAINT LUCIE, FL 34952

SUBJECT: PROVIDENCE INC.  
Ref. Number: W12000029107

We have received your document for PROVIDENCE 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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.

Valerie Herring  
Regulatory Specialist II  
New Filing Section

Letter Number: 512A00015310

**ARTICLES OF INCORPORATION****OF****Smith & Campbell Associates Inc.****FILED****12 JUN 25 AM 11:02****SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

The undersigned subscriber to these Articles of Incorporation is a natural person competent to contract and hereby form a Corporation for profit under Chapter 607 of the Florida Statutes.

**ARTICLE I - NAME**

The name of the Corporation is Smith & Campbell Associates Inc., (hereinafter, "Corporation").

**ARTICLE II - PRINCIPAL OFFICE**

The address of the principal office of this Corporation is 604 Coconut Ave Port, Saint Lucie, Florida 34952 and the mailing address is the same.

**ARTICLE III - PURPOSE OF CORPORATION**

The Corporation shall engage in any activity or business permitted under the laws of the United States and of the State of Florida.

**ARTICLE IV - PRINCIPAL OFFICE**

The maximum number of shares that this Corporation is authorized to have outstanding at any time is TEN THOUSAND (10,000) shares of common stock, each share having the par value of ONE CENT (\$.01).

**ARTICLE V - INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Winston Smith President  
Address: 604 Coconut Avenue N  
Port Saint Lucie, FL., 34952

Name and Title Mary Campbell-Smith Director  
Address: 604 Coconut Ave N  
Port Saint Lucie, FL., 34952

Name and Title: Miriam Cook Secretary  
Address: 5705 NW N Macedo Blvd.  
Port Saint Lucie, FL., 34983

**ARTICLE VI - REGISTERED AGENT**

The name and Florida street address of the registered agent is:

Winston Smith  
604 Coconut Avenue N  
Port Saint Lucie, Florida, 34952

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Article VII - INCORPORATOR**

The name and address of the of the incorporator is:

Winston Smith  
604 Coconut Avenue N  
Port Saint Lucie, Florida, 34952

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



Registered Signiture/Registered Agent

6/20/2012  
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



Registered Signiture/Registered Agent

6/20/2012  
Date