

P/2000060248

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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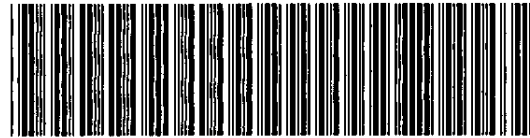
(Business Entity Name)

(Document Number)

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FILED
12 JUL -9 AM 11:32
TALLAHASSEE, FLORIDA

W12-32389

K 07/10/12



RECEIVED
12 JUL -9 PM 2:04

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 14, 2012

JEAN-CLAUDE CHERILUS
3821 N. ANDREWS AVENUE
OAKLAND PARK, FL 33309

SUBJECT: MASSIVE MARKETING INC.
Ref. Number: W12000032389

We have received your document for MASSIVE MARKETING 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.

The document number of the name conflict is L08000082911 (MASSIVE MARKETING, LLC).

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 712A00016711

COVER LETTER

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

SUBJECT: MASSIVE MARKETING INSURANCE PRODUCTS 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: JEAN-CLAUDE CHERILUS
Name (Printed or typed)
4500 N.W. 4th CT
Address
PLANTATION, FL 33317
City, State & Zip
954-479-2396
Daytime Telephone number
JCHERILUS01@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: MASSIVE MARKETING INSURANCE PRODUCTS INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
3821 N. ANDREWS
AVENUE
OAKLAND PARK, FL 33309

Mailing address, if different is:

SAME AS ABOVE

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INSURANCE, MORTGAGE, REAL ESTATE, INCOME TAX,
DRIVING SCHOOL.

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JEAN-CLAUDE CHERILUS
Address: 4500 N.W. 4th COURT
PLANTATION, FL 33317
PRESIDENT

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: JEAN-CLAUDE CHERILUS
Address: 4500 N.W. 4th COURT
PLANTATION, FL 33317

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JEAN-CLAUDE CHERILUS
Address: 4500 N.W. 4th COURT
PLANTATION, FL 33317

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

J. C. Cherilus
Required Signature/Registered Agent

07-05-2012
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.

J. C. Cherilus
Required Signature/Incorporator

07-05-2012
Date

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12 JUL -9 AM 11:32
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA