## P12000070831

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		

Office Use Only



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FILING CANCELLED RETURNED CHECK

08/17/12--01001--003 \*\*70.00

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## **COVER LETTER**

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

SUBJECT: Shoe Act	ion.Inc	
(PROPOSED CORPORA	TE NAME – <u>MUST INCLUDE SUFFIX</u> )	
	•	
Enclosed are an original and one (1) copy of the articles of incorporation and a check for:		
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee  & Certified Copy & Certified Copy & Certificate of Status  ADDITIONAL COPY REQUIRED	
FROM: Same (Printed or typed)		
PIOBOX 2152		
Jallahassee FL 325/6		
Daytime Telephone number		
90 Ta 1499 a Yahaa Com E-mail address: (to be ased for fundre annual report notification)		

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

## ARTICLES OF INCORPORATION 352257112 In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit) Action . Inc NAME ARTICLE I The name of the corporation shall be: ARTICLE II PRINCIPAL OFFICE Principal street address Palacher PKWy#05\_ ARTICLE III **PURPOSE** The purpose for which the corporation is organized is: FILING CANCELLED RETURNED CHECK The number of shares of stock is ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS \_ Name and Title: \_ Name and Title:\_ Address: Ahah Name and Title: Address: Address: Name and Title: Name and Title: Address: Address: ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Sameer okaihan Name: Address: 2125 WPensacola ARTICLE VII The name and address of the Incorporator is: Name: Address:

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 acceptate appointment as registered agent and agree to act in this capacity

08/6-12 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.

> Signature Incorporator Required

Required Signature/Registered Agent

68-16-12 Date