

P12000073375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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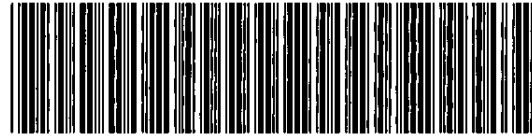
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/27/12--01005--010 **70.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 AUG 27 AM 11:13

Ps 8/28/12

COVER LETTER

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

SUBJECT: Hayla 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: Ashley Smith.
Name (Printed or typed)

1088 Holy Gate Ln.
Address

Naples FL 34103
City, State & Zip

941-763 2404
Daytime Telephone number

GreenKeyPM@gmail.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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

ARTICLE I NAME

The name of the corporation shall be: HAYLA INC.

12 AUG 27 AM 11:13

ARTICLE II PRINCIPAL OFFICE

Principal street address

1088 Holygate Ln.
Naples FL 34103

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Textile

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Ashley Smith, President

Address: 1088 Holygate Ln.
Naples FL 34103

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: Ashley Smith

Address: 1088 Holygate Ln.
Naples FL 34103

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Ashley Smith.

Address: 1088 Holygate Ln.
Naples FL 34103

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

x Ashley Smith
Required Signature/Registered Agent

8/17/2012
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.

x Ashley Smith
Required Signature/Incorporator

8/17/2012
Date