

PI2000101591

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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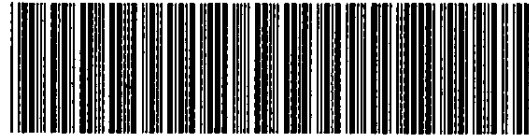
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE FLORIDA

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9

## COVER LETTER

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

SUBJECT: Hanover Global, 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: Olufunke Alugbin  
Name (Printed or typed)  
11555 Willow Gardens Drive  
Address  
Windermere, Florida 34786  
City, State & Zip  
407-876-2410  
Daytime Telephone number  
funkyday@aol.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: **Hanover Global, Inc.**

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
11555 Willow Gardens Drive  
Windermere, Florida 34786

Mailing address, if different is:

Same  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: **General Business, Retail & Staffing**

**ARTICLE IV SHARES**

The number of shares of stock is: **1000**

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

Name and Title: Olufunke Alugbin  
Address: 11555 Willow Gardens Drive  
Windermere, Florida 34786

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: Olufunke Alugbin  
Address: 11555 Willow Gardens Drive  
Windermere, Florida 34786

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Olufunke Alugbin  
Address: 11555 Willow Gardens Drive  
Windermere, Florida 34786

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*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*



Required Signature/Registered Agent

12/5/2012  
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.*



Required Signature/Incorporator

12/5/2012  
Date