

713000003771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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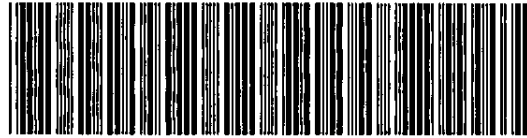
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers JAN 11 2013

COVER LETTER

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

SUBJECT: **SMW Publishing, 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: **Stanley Wakefield**

Name (Printed or typed)

16 Masters Court

Address

Palm Coast, FL 32137

City, State & Zip

305-528-9765

Daytime Telephone number

moisant@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: SMW Publishing, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

16 Masters Court

Palm Coast, FL 32137

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Publishing of books, eBooks, database publications and all related forms of media.

ARTICLE IV SHARES

The number of shares of stock is: 1,000 Shares

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: S.M. Wakefield

Address: 16 Masters Court

Palm Coast, FL 32137

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: S.M. Wakefield

Address: 16 Masters Court

Palm Coast, FL 32137

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: S.M. Wakefield

Address: 16 Masters Court

Palm Coast, FL 32137

SECRETARY OF STATE
TALLAHASSEE FLORIDA

13 JAN 10 AM 10:24

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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

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

Date

1/5/13