

P130000011440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

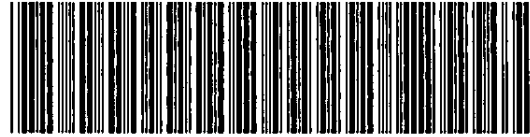
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/04/13--01060--024 **78.75

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 FEB -4 PM 1:38

DS 2/5/13-

COVER LETTER

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

SUBJECT: Beneficial Investments 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 ☒ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status
ADDITIONAL COPY REQUIRED

FROM: Jagjit s. Rosha
Name (Printed or typed)
9777sw 1st ct
Address
coral springs fl33071
City, State & Zip
954-540-8277
Daytime Telephone number
jagjitrosha3@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: Beneficial investments inc

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ARTICLE II PRINCIPAL OFFICE

Principal street address

9777 sw 1st ct

coral springs

florida 33071

Mailing address, if different is:

po box 770811

coral springs

florida 33077

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to conduct a lawfull business.

ARTICLE IV SHARES

The number of shares of stock is: 1000000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jagjit s. Rosha president

Name and Title: _____

Address 9777sw 1st st

Address: _____

coral springs

Florida 33071

Name and Title: Jagjit s. Rosha treasurer

Name and Title: _____

Address 9777sw ist ct

Address: _____

coral springs

florida33071

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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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:

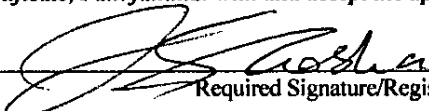
Name: Jagjit s. Rosha
Address: 9777sw 1st ct
coral springs fl33071

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Jagjit s .Rosha
Address: 9777sw 1st ct
coral springs fl33071

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

02-02-2013
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

02-02-2013
Date