

P13000019809

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

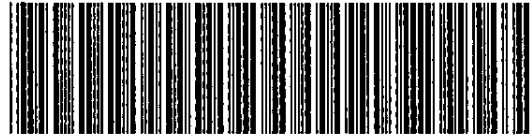
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02/07/13--01011--010 **78.75

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13 FEB 28 PM 4:25

SECRETARY OF STATE
TALLAHASSEE, FL 32399

T. Burch MAR 1 2013

COVER LETTER

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

SUBJECT: HAUGABOOK & ASSOCIATES, 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: HAUGABOOK & ASSOCIATES, INC
Name (Printed or typed)
2811 NW 174 STREET
Address
MIAMI GARDENS, FLORIDA 33056
City, State & Zip
305 785-6719
Daytime Telephone number
rdgaineone@yahoo.com
E-mail address: (to be used for future annual report notification)

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



RECEIVED

13 FEB 28 AM 11:28

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 8, 2013

ROBIN MIMS
2811 NW 174 STREET
MIAMI GARDENS, FL 33056

SUBJECT: HAUGABOOK & ASSOCIATES, INC.
Ref. Number: W13000007959

We have received your document for HAUGABOOK & ASSOCIATES, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

You have indicated in your document the ownership and percentages of the authorized shares. Please note this information is not required nor is it maintained by the Department of State. While we cannot require such, it is recommended that it be removed from the document. The only information needed for this filing is the number of authorized shares.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist II
New Filing Section

Letter Number: 313A00003222

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: HAUGABOOK & ASSOCIATES, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2811 NW 174 STREET

MIAMI GARDENS, FL 33056

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Special events planning and travel arrangement services.

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TALLAHASSEE, FL

ARTICLE IV SHARES

The number of shares of stock is: 1,000,000 with an option pool of 100,000 and 900,000 to the founders.

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Asiguy Haugabook, President

Name and Title: _____

Address: 4911 NW 23rd Avenue
Miami, FL 33142

Address: _____

Name and Title: Robin Mims, Vice President

Name and Title: _____

Address: 2811 NW 174 Street
Miami, FL 33056

Address: _____

Name and Title: Dana Lester, General Manager

Name and Title: _____

Address: 1640 NW 4th Avenue
Apt # 10B
Miami, FL 33136

Address: _____

(cont)

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: Asiguy Haugabook
Address: 4911 NW 23rd Avenue
Miami, FL 33142

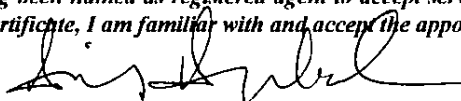
ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Robin Mims
Address: 2811 NW 174 Street
Miami Gardens, FL 33056

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SECRETARY OF STATE
TALLAHASSEE, FL

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

1/10/13
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

1/10/13
Date