

P13000030290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

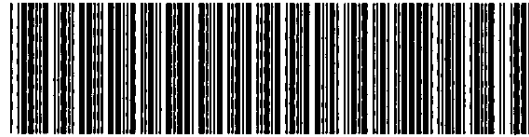
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200245229612

03/13/13--01024--003 **70.00

SECRET
OFFICE OF STATE
ATTORNEY GENERAL
FLORIDA

13 APR - 2 AM 11:02

FILED

J. Shivers APR 03 2013

W13-15



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 14, 2013

HEATHER HANNON
13611 S DIXIE HWY #109-530
MIAMI, FL 33176

SUBJECT: STATEMENT, CO
Ref. Number: W13000015155

We have received your document for STATEMENT, CO and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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.

Justin M Shivers
Regulatory Specialist II
New Filing Section

Letter Number: 313A00006094

COVER LETTER

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

SUBJECT: Statement., Co.

(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: Heather Hannon

Name (Printed or typed)

13611 S. Dixie Highway, #109-530

Address

Miami, FL 33176

City, State & Zip

(305) 978-8784

Daytime Telephone number

hannon@stmt.co

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: Statement. Design, Co.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

13611 S. Dixie Highway, #109-503

Miami, FL 33176

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Statement. Design, Co. builds brands and offers design services in the fields of web, mobile, print and environmental.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Heather Hannon, Director

Address: 13611 S. Dixie Highway

#109-503

Miami, FL 33176

Name and Title: Blake Everingham, Director

Address: 13611 S. Dixie Highway

#109-503

Miami, FL 33176

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

13 APR - 2 AM 11:02
STATE
FALL
CRIDA

(conti.)

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: Heather Hannon
Address: 13611 S. Dixie Highway, #109-530
Miami, FL 33176

ARTICLE VII INCORPORATOR

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

Name: Heather Hannon
Address: 13611 S. Dixie Highway, #109-530
Miami, FL 33176

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

Heather Hannon
Required Signature/Registered Agent

03/29/2013

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.

Heather Hannon
Required Signature/Incorporator

03/29/2013

Date
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

13 APR -2 AM 11:02

7/1/13