

P13000057379

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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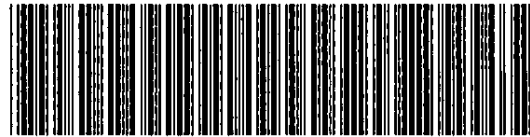
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/17/13--01006--007 **78.75

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13 JUL -1 AM 11:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W13-35464

K 07/08/13

COVER LETTER

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

SUBJECT: STRATEGY CORP

(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: STRATEGY CORP.

Name (Printed or typed)

19131 NW 88 COURT

Address

HIALEAH, FLORIDA. 33018

City, State & Zip

305-829-6699

Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 19, 2013

STRATEGY CORP.
19131 NW 88 COURT
HIALEAH, FL 33018

SUBJECT: STRATEGY CORP.
Ref. Number: W13000035464

We have received your document for STRATEGY CORP. 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 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.

The document number of the name conflict is S16438 (STRATEGY, INC.).

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.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 913A000153

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

13 JUL -1 PM 3:28

RECEIVED

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAME FIRST STRATEGY CORP.

The name of the corporation shall be: _____

ARTICLE II PRINCIPAL OFFICE

Principal street address

19131 NW 88 CT
HIALEAH, FLORIDA 33018

Mailing address, if different is:

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: GENERAL ADMINISTRATIVE

ARTICLE IV SHARES 500 COMMON STOCK

The number of shares of stock is: _____

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JOSE ARMADA SR
Address: 8906 NW 194 TERR
HIALEAH, FL. 33018

Name and Title: PRESIDENT

Address: _____

Name and Title: ANNETTE ARMADA
Address: 19131 NW 88 CT
HIALEAH, FL. 33018

Name and Title: VICE-PRESIDENT

Address: _____

Name and Title: JOSE ARMADA JR
Address: 15101 MONTROSE ROAD
MIAMI LAKES, FL. 33016

Name and Title: SECRETARY

Address: _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(conti.)

Name and Title: JOSE ARMADA JR
Address: 15101 MONTROSE ROAD
MIAMI LAKES, FL. 33016

Name and Title: TREASURY
Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: ANNETTE ARMADA
Address: 19131 NW 88 CT, HIALEAH, FL. 33018

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: JOSE ARMADA JR
Address: 15101 MONTROSE ROAD, MIAMI LAKES, FL. 33016

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

X

Required Signature/Registered Agent

6/13/2013

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

6/13/2013

Date