

P/3000099648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

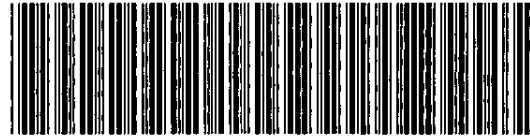
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status ☒

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Office Use Only



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12/13/13--01023 --002 \*\*78.75

RECEIVED  
13 DEC 13 AM 9:57  
CLERK OF SUPERIOR COURT  
STATE OF NEW YORK  
JULIA A. BRYCE

12-16-13

**COVER LETTER**

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

**SUBJECT: Salomon Group 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: Evans Mercier**

Name (Printed or typed)

**5020 Williamstown Blvd.**

Address

**Lakeland, FL 33810**

City, State & Zip

**863-937-4673**

Daytime Telephone number

**sgpres@outlook.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)

RECEIVED  
CLERK OF DISTRICT COURT  
13 DEC 13 AM 9:57  
INTEGRAL OF INCORPORATIONS

**ARTICLE I NAME**  
The name of the corporation shall be: Salomon Group Inc.

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address

Mailing address, if different is:

5020 Williamstown Blvd.

Lakeland, FL 33810

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is: Any and all lawful business.

**ARTICLE IV SHARES**  
The number of shares of stock is: 30000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Evans Mercier, P

Name and Title: \_\_\_\_\_

Address 5020 Williamstown Blvd.  
Lakeland, FL 33801

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address \_\_\_\_\_

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: Evans Mercier

Address: 5020 Williamstown Blvd.

Lakeland, FL 33810

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Evans Mercier

Address: 5020 Williamstown Blvd.

Lakeland, FL 33810


*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

12/14/13  
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

12/14/13  
Date