

P14000011984

(Requestor's Name)

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(Business Entity Name)

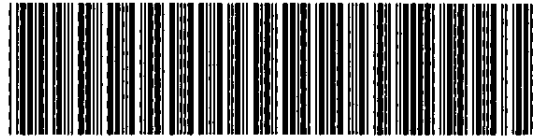
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: **FLORIDA WEB PROS, 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: **CARRI NORRIS, CPA**

Name (Printed or typed)

28 S. WASHINGTON ST., STE. 201

Address

OXFORD, MI 48371

City, State & Zip

(248)236-0754

Daytime Telephone number

CARRI@NORRISCPAPLLC.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)

ARTICLE I NAME

The name of the corporation shall be: **FLORIDA WEB PROS, INC.**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2674 NE 8TH CT., POMPAHO, FL 33602

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **WEB DESIGN SERVICES**

ARTICLE IV SHARES

The number of shares of stock is: **10,000**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **BENJAMIN HELLER, PRESIDENT**

Address **2674 NE 8TH CT., POMPAHO, FL 33602**

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

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DIVISION OF CORPORATIONS
14 FEB -3 AM ID: 01

(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: BENJAMIN HELLER

Address: 2674 NE 8TH CT.

POMPANO, FL 33602

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: CARRI NORRIS, CPA

Address: 28 S. WASHINGTON ST., STE. 201

OXFORD, MI 48371


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

1/27/14
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

1/27/14
Date

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