

P14000014085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

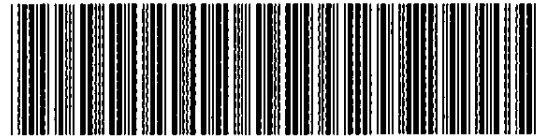
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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DEPARTMENT OF STATE  
14 FEB 11 AM 3:03

RECEIVED  
DEPARTMENT OF STATE  
14 FEB 17 AM 10:56  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

W14-9008

TL 02/17/14



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 11, 2014

CASSANDRA GREEN  
2555 COLLINS AVENUE  
SUITE C-8  
SOUTH MIAMI, FL 33140

SUBJECT: BCGNEEDS HOLDINGS, INC.  
Ref. Number: W14000009008

We have received your document for BCGNEEDS HOLDINGS, INC. and your check(s) totaling \$140.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Document returned as requested.

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

Thomas Chang  
Regulatory Specialist II  
New Filing Section

Letter Number: 314A00003121

## COVER LETTER

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

**SUBJECT:** Bcgneeds Holdings, 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:** Cassandra Green for Safer Universe, Inc.  
Name (Printed or typed)  
Club Atlantis Condominiums, Ste. C-8  
Address  
South Miami, Florida 33140  
City, State & Zip  
305 509 9333  
Daytime Telephone number  
bcgneeds@gmail.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: Bcgneeds Holdings, Inc.

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

Club Atlantis Condominiums

2555 Collins Avenue, Suite C-8

South Miami, Florida 33140

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: To engage in any and all legal business ventures  
and enterprises permitted under the laws of the United States.

**ARTICLE IV    SHARES**

The number of shares of stock is: 1000

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

Name and Title: Justice. N. Chuku

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

Address President

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

Club Atlantis Condominiums

2555 Collins Avenue, Suite C-8

Name and Title: South Miami, Florida 33140

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

Address \_\_\_\_\_

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

Name and Title: Ngozi Chuku, Vice President

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

Address Club Atlantis Condominiums

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

2555 Collins Avenue, Suite C-8

South Miami, Florida 33140

STATE OF FLORIDA  
DEPARTMENT OF REVENUE

14 FEB 17 AM 10:56

APPROVED  
AND  
FILED

(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: Cassandra Green  
Address: 2555 Collins Avenue, Suite C-8  
South Miami, Florida 33140

APPROVED  
FILED  
14 FEB 17 AM 10:56  
CLERK OF THE COURT  
STATE OF FLORIDA

**ARTICLE VII INCORPORATOR**

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

Name: Cassandra Green  
Address: 2555 Collins Avenue, Suite C-8  
South Miami, Florida 33140

*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  
13-Feb-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  
13-Feb-14  
Date