

P14000016709

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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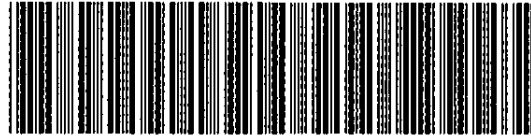
(Business Entity Name)

(Document Number)

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

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DIVISION OF CORPORATIONS  
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**MARTIN E SEGAL, P.A., LAW OFFICES  
ATTORNEY AND COUNSELOR AT LAW  
2899 COLLINS AVE., PENTHOUSE K  
MIAMI BEACH, FLA. 33140  
PHONE: (305) 284-4870  
CELL: (305) 710-5287  
FAX: (305) 284-3762**

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**2/13/14**

**Florida Dep't. of State  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314**

**Re: Phonics 2.0, Inc.**


**Dear Sir / Madam,**

**We enclose original and one copy of Articles of Incorporation for Phonics 2.0, Inc.**

**We also enclose our check #2260 payable to Department of State in the amount of \$87.50, covering filing fee, certified copy, and certificate of status to be returned to our attention.**

**If there are any questions, please contact the undersigned.**

**Very truly yours,**

  
**Martin E. Segal, Pres.**

**MES/me  
encl**

## COVER LETTER

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

SUBJECT: **PHONIES 2.0, 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: **Martin E. Segal, P.A. Law Offices**

Name (Printed or typed)

**2899 Collins Ave., Penthouse K**

Address

**Miami Beach, FL 33140**

City, State & Zip

**305 - 710 - 5287**

Daytime Telephone number

**msegal@miami.edu**

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** PHONIES 2.0, INC.  
The name of the corporation shall be: \_\_\_\_\_

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is: \_\_\_\_\_

c/o Martin E. Segal, P.A.  
2899 Collins Ave., Penthouse K  
Miami Beach, FL 33140

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful purposes, including  
but not limited to: Rentry of the Smart Phone outgoing message, ringtones,  
and alert tones business - creating content and marketing of phone/tone  
message voices to final customers over the Internet.

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**ARTICLE IV SHARES** 300  
The number of shares of stock is: \_\_\_\_\_

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

Name and Title: Henry Lloyd Burkley, Sr.(Pres/D)

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

Address 745 Pinellas Bayway South

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

Unit 202

Tierra Verde, FL 33715

Name and Title: Anderson Humphreys (VP/D)

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

Address 1185 Knox Road

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

Rossville, TN 38066

Name and Title: Martin E. Segal (Sec-Treas/D)

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

Address 2899 Collins Ave., Penthouse K

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

Miami Beach, FL 33140

(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:

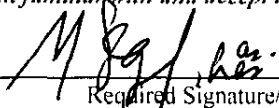
Name: Martin E. Segal, P.A. Law Offices  
Address: 2899 Collins Ave., Penthouse K  
Miami Beach, FL 33140

**ARTICLE VII INCORPORATOR**


The name and address of the Incorporator is:

Name: Martin E. Segal, P.A.  
Address: 2899 Collins Ave., Penthouse K  
Miami Beach, FL 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*

 2/13/14  
Required Signature/Registered Agent 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.*

 2/13/14  
Required Signature/Incorporator Date