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(Business Entity Name)

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DIVISION OF CORPORATIONS
2014 FEB 26 PM 3:46

14

COVER LETTER

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

SUBJECT: Better Life Systems, 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: HOWARD SANDERS
Name (Printed or typed)
1839 GASTON FOSTER RD
Address
ORLANDO, FL 32812
City, State & Zip
501-866-5152
Daytime Telephone number
hsand214@comcast.net
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: Better Life Systems, Inc

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ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

1839 Gaston Foster RD

Orlando FL, 32812

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Call Center

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Howard Sanders - President Name and Title: _____

Address 1839 Gaston Foster RD Address: _____
Orlando FL, 32812

Name and Title: Beverly Sanders - Secretary Name and Title: _____

Address 19546 Saturnia Lakes Dr Address: _____
Boca Raton FL, 33498

Name and Title: Howard Sanders - Treasurer Name and Title: _____

Address 1839 Gaston Foster RD Address: _____
Orlando FL, 32812

(conti.)

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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DIVISION OF CORPORATIONS

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ARTICLE VI REGISTERED AGENT

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

Name: _____

Howard Sanders

Address: _____

1839 Gaston Foster RD

Orlando FL, 32812

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: _____

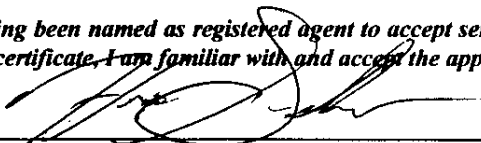
Howard Sanders

Address: _____

1839 Gaston Foster RD

Orlando FL, 32812

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

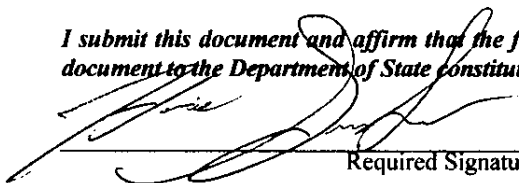


Required Signature/Registered Agent

02-21-2014

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

02-21-2014

Date