

P14000035397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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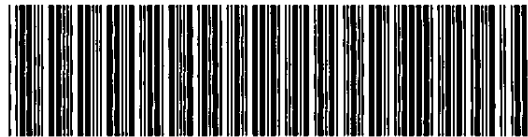
(Business Entity Name)

(Document Number)

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K 04/21/14

## COVER LETTER

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

**SUBJECT: BEVERLY'S ORGANIC NATURAL JUICE BAR 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: BEVERLY GLOVER**  
Name (Printed or typed)  
**540 SW 38TH TERRACE**  
Address  
**FT LAUDERDALE, FL 33312**  
City, State & Zip  
**954 740-7328**  
Daytime Telephone number  
**beverlyorganicjuices@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: BEVERLY'S ORGANIC NATURAL JUICE BAR INC

**ARTICLE II    PRINCIPAL OFFICE**

Principal street address

1345B N STATE ROAD 7

LAUDERHILL

FLORIDA 33313

Mailing address, if different is:

540 SW 38TH TERRACE

FT LAUDERDALE

FLORIDA 33312

**ARTICLE III    PURPOSE**

The purpose for which the corporation is organized is: TO CONDUCT LEGAL BUSINESS IN THE  
STATE

**ARTICLE IV    SHARES**

The number of shares of stock is: ONE HUNDRED

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

Name and Title: BEVERLY GLOVER - PRESIDENT, SECRETARY, TREASURER

Address

540 SW 38TH TERRACE

FT LAUDERDALE

FLORIDA 33312

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

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

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

Address

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

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

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

Address

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

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(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: BEVERLY GLOVER  
Address: 540 SW 38TH TERRACE  
FT LAUDERDALE FL 33312

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TALLAHASSEE, FLORIDA

**ARTICLE VII INCORPORATOR**

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

Name: BEVERLY GLOVER  
Address: 540 SW 38TH TERRACE  
FT LAUDERDALE FL 33312

*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*

*[Signature]*  
\_\_\_\_\_  
Required Signature/Registered Agent

3-27-2014  
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.*

*[Signature]*  
\_\_\_\_\_  
Required Signature/Incorporator

3-27-2014  
Date