

P14000043817

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

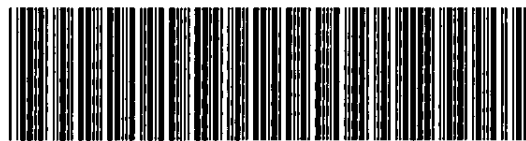
(Business Entity Name)

(Document Number)

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

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05/15/14--01028--007 \*\*78.75

FILED  
14 MAY 15 AM 8:50  
SECRETARY OF STATE  
DIVISION OF CORPORATION

FILED  
14 MAY 15 AM 9:09  
SECRETARY OF STATE  
DIVISION OF CORPORATION

5/16/14

## COVER LETTER

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

**SUBJECT: MY BEST FIGHT MOVE, 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: SJ COOPER & ASSOCIATES**

Name (Printed or typed)

**C/O 3269 STURGEON BAY COURT**

Address

**NAPLES FL 34120**

City, State & Zip

**239-398-3637**

Daytime Telephone number

**steven@sjcfinance.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: MY BEST FIGHT MOVE, INC

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

5049 RUSTIC OAKS CIRCLE

NAPLES, FL 34105

Mailing address, if different is:

C/O SJ COOPER & ASSOCIATES

3269 STURGEON BAY COURT

NAPLES, FL 34120

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: A LEGAL & LAWFUL CONSULTING CORPORATION

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: JAMES WELL GLODMAN, P

Address 5049 RUSTIC OAKS CIRCLE

NAPLES, FL 34105

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

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

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

Address \_\_\_\_\_

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

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

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

Address \_\_\_\_\_

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

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

FILED  
CLERK OF CIRCUIT COURT  
14 MAY 15 AM 8:51  
JAMES WELL GLODMAN, P

(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:

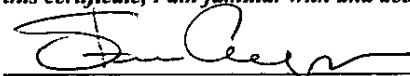
Name: STEVEN COOPER  
Address: 4001 SANTA BARBARA BLVD #366  
NAPLES FL 34104

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: STEVEN COOPER  
Address: 4001 SANTA BARBARA BLVD # 366  
NAPLES, FL 34104

*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*

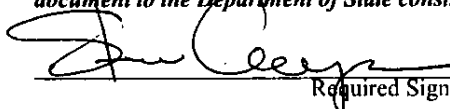


\_\_\_\_\_  
Required Signature/Registered Agent

5/12/2014

\_\_\_\_\_  
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

5/12/2014

\_\_\_\_\_  
Date