

P14.000060975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

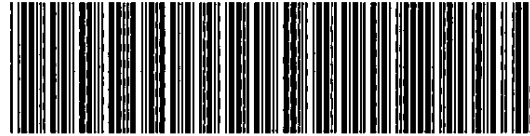
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL -7 AM 10:26

~~2140000449341~~
9/18/14

COVER LETTER

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

SUBJECT: OnLine Office Support of Florida 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
Filing Fee
& Certified Copy

☒ \$87.50
Filing Fee,
Certified Copy
& Certificate of
Status

ADDITIONAL COPY REQUIRED

*BACK DATE PLEASE
NOTE: July 1, 2014 EFFECTIVE
DATE*

FROM: Samuel W Warren

Name (Printed or typed)

2500 6th St W

Address

Lehigh Acres, FL 33971-1448

City, State & Zip

(515)360-7560

Daytime Telephone number

dr.samoosfl@gmail.com

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

14 JUL 17 2 11 PM '14

July 8, 2014

SAMUEL WARREN
2500 6TH ST W
LEHIGH ACRES, FL 33971-1448

SUBJECT: ONLINE OFFICE SUPPORT OF FLORIDA INC
Ref. Number: W14000041934

We have received your document for ONLINE OFFICE SUPPORT OF FLORIDA INC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete Article III of your document. You must state the purpose of the Corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Carol Mustain
Regulatory Specialist II

Letter Number: 514A00014654

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: OnLine Office Support of Florida Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

2500 6th St W

Lehigh Acres, FL 33971-1448

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and all lawful business.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL -7 AM 10:26

ARTICLE IV SHARES

The number of shares of stock is: 25,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Samuel W Warren, President

Name and Title: Edith T Warren, Secretary

Address 2500 6th St W
Lehigh Acres, FL 33971-1448

Address: 2500 6th St W
Lehigh Acres, FL 33971-1448

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

(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: Samuel W Warren

Address: 2500 6th St W

Lehigh Acres, FL 33971-1448

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Samuel W Warren

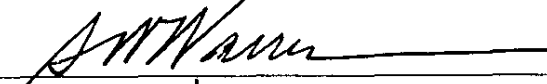
Address: 2500 6th St W

Lehigh Acres, FL 33971-1448

ARTICLE VIII EFFECTIVE DATE:

The effective date of this incorporation is: July 1, 2014

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



S.W. Warren

Required Signature/Registered Agent

June 30, 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.


S.W. Warren

Required Signature/Incorporator

June 30, 2014

Date