

P/4000076385

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

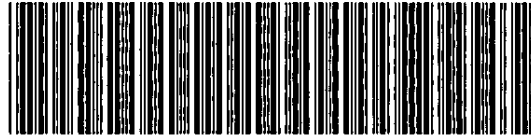
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

09/16/14

September 10, 2014

Division of Corporations
Tallahassee, Florida

To Whom It May Concern:

I am requesting that my corporation name of One New Line Inc.
Be released and I do not retain the name effective immediately.

This is a unanimous choice by the stockholders

Thank you,

Kenneth Humell

Doc# P95000037968

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TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: One More Time Inc
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and check for:

☐

\$70.00
Filing Fee

☒

\$78.75
Filing Fees &
Certificate of Status

☐

\$78.75
Filing Fee
& Certified Copy

☐

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

ADDITIONAL COPY REQUIRED

FROM: Nettie Davis, Inc.
846 SW Main Blvd.
Lake City, FL 32026
(Name printed or typed)

Address

City, State & Zip

386 752 4576

Daytime Telephone number

NettieDavisInc@gmail.com

Email 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: One More Time Inc

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

300 S Washington Ave
Lot 261
Fort Meade, FL 33841

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any & All lawful purpose

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kenneth Hurrell Name and Title: _____

Address: 300 S Washington Ave Address: _____
Lot 261
Fort Meade FL 33841

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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TALLAHASSEE, FLORIDA

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: Kenneth Hurnell
Address: 300 S Washington Ave Lot 261
Ft Meade FL 33841

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TALLAHASSEE, FLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Nettie Davis, Inc.
Address: 846 SW Main Blvd.
Lake City, FL 32025

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

Kenneth Hurnell
Required Signature/Registered Agent

9/11/14
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.

Nettie Davis
Required Signature/Incorporator

9/11/14
Date