P1400018/88

(Re	equestor's Name)		
(Ac	ldress)		
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(Ci	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	usiness Entity Nar	ne)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		

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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 9, 2014

JOHN KEELER 2917 TUSCANY COURT, #302 PALM BEACH GARDENS, FL 33410

SUBJECT: THE TRANQUIL MONK,

Ref. Number: W14000055077

We have received your document for THE TRANQUIL MONK, and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the corrected original and one copy of 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.

Tyrone Scott Regulatory Specialist II New Filings Section

Letter Number: 814A00019250

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COVER LETTER

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

SUBJECT:	Tranquil Monk,	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the ar	ticles of incorporation and	d a check for:
\$70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy ADDITIONAL CO	□ \$87.50 Filing Fee, Certified Copy & Certificate of Status PPY REQUIRED
FROM: JO	ohn Keeler		·

Name (Printed or typed) 2917 Tuscany Court, #302 Address Palm Beach Gardens, fl 33410 City, State & Zip 561-707-4872 Daytime Telephone number

jackreleek@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)

8713 Federa	Principal street address al Highway ie, Fl 34952	Mailing address, if different is:	
ARTICLE III PUR The purpose for which to	Pose he corporation is organized is:	Store - Aroma	
	JARES 100 FIAL OFFICERS AND/OR DIRECTO John Keeler President 2917 Tuscany Ct #302, Palm Beach Gardens, FI 33410	RS Name and Title:Address:	SEP 19 PH 2: 17
Name and Title: Address		Address:	
Name and Title:		Name and Title:	

Name and	d Title:	Name and Title:	
Address		Address:	
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A DATAL D PR		The state of the s	知
The name and El	<u>REGISTERED AGENT</u> orlda street address (P.O. Box NOT acceptable) of	fthe registered agent is:	医
Name:	John Keeler	t the registered agent is.	
Address:	2917 Tuscany Ct #302		
	Palm Beach Gardens, Fl 33410	2: -	- 4
ARTICLE VII	INCORPORATOR	_	(B)
The name and ad	ldress of the Incorporator is:		
Name:	John Keeler	_	
Address:	2917 Tuscany Ct #302	_	
	Palm BEach Gardens, Fl 33410	-	
Having been nam this certificate, I a	ned as registered agent to accept service of process um familiar with and accept the appointment as regi	s for the above stated corporation at the place designat gistered agent and agree to act in this capacity	ed in
	John Mach	9-3-301	4
//	Required Signature/Registered Agent	Date	_
	ument and affirm that the facts stated herein are t Department of State constitutes a third degree felony	true. I am aware that the false information submitted by as provided for in s.817.155, F.S.	in a
	Regained Signature/Incorporator	Date	