

P14000079798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

W1400056903

SEP 26 2014

T. SCOTT



700264227287

09/15/14--01040--007 **70.00

SEP 25 PM 3:10
DIVISION OF REVENUE
TREASURY



RECEIVED

14 SEP 25 AM 10:55

FLORIDA DEPARTMENT OF STATE
Division of Corporations
TALLAHASSEE, FLORIDA

September 17, 2014

KEVIN GRIFFIS
520 SE 5TH AVENUE, UNIT 2403
FORT LAUDERDALE, FL 33301

SUBJECT: INVESTIGATIONS PLUS INC
Ref. Number: W14000056903

We have received your document for INVESTIGATIONS PLUS INC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information.
<http://www.sunbiz.org/titledef.html>.

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: 114A00019900

COVER LETTER

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

SUBJECT: Investigations Plus 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: Kevin Griffis
Name (Printed or typed)

520 SE 5th Avenue, Unit 2403
Address

Fort Lauderdale, FL 33301
City, State & Zip

574-292-9255
Daytime Telephone number

kevingriffis79@gmail.com
E-mail address: (to be used for future annual report notification)

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

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

The name of the corporation shall be: Investigations Plus, Inc.

Principal street address

Mailing address, if different is:

200 SE 6th Street, Suite 506

Fort Lauderdale, FL 33301

The purpose for which the corporation is organized is: Private Investigation Services

The number of shares of stock is: 100

Name and Title: Kevin Griffis / President Name and Title:

Address 520 SE 54th Ave. Unit 2403 Address:

Fort Lauderdale, FL 33301

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: Kevin Griffis
Address: 200 SE 6th St. Suite 506
Fort Lauderdale, FL 33301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Kevin Griffis
Address: 200 SE 6th St. Suite 506
Fort Lauderdale, FL 33301

RECEIVED
DIVISION OF CORPORATE
AND FINANCIAL SERVICES
SEP 25 PM 3:10

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

Kevin Griffis
Required Signature/Registered Agent

09/04/2014
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.

Kevin Griffis
Required Signature/Incorporator

09/04/2014
Date