## P1400081385

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	<del></del>
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**SEP 2 9 2014 S. GILBERT** 

## **COVER LETTER**

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

## SUBJECT. ANNEXUS TECHNOLOGIES INC

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX

Enclosed are an or	iginal and one (I) copy of the a	ticles of incorporation and	d a check for:
□ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Centified Copy & Certificate of Status

FROM:	ANDREW N GRIFFITHS
	Name (Printed or typed)
	3240 NW 46 AVENUE
	Address
	LAUDERDALE LAKES FL 33319
	City, State & Zip
	772 629-0971
	Daytime Telephone number
	ANGRIFFITHS@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)

ne of the corpo				$T^{\prime\prime\prime}MM \wedge U$
LE II PI	RINCIPAL OFFICE Principal street address	Maili	ng address, if di	AHASSE fferent is:
NW 46	AVENUE	wani	ing address, it dr	iterein 15.
	LE LAKES FL 33319		·	
·	LL LAKES I L 33319		<u></u>	
PLE III PU	RPOSE  n the corporation is organized is:	DUCT ALL LEGAL	BUSINESS	IN THE S
			· · · · · · · · · · · · · · · · · · ·	
	18-48-47-1			
LE IV SH	IARES of stock is:			
LE V IN	IARES OF STOCK IS: ONE HUNDRED  ITTAL OFFICERS AND/OR DIRECTOR  ANDREW IN GRIFFITHS - PRESIDENT, SECRETARY, TREASURER	<del></del>		
LE V IN	TTIAL OFFICERS AND/OR DIRECTOR  ANDREWN GRIFFITHS - PRESIDENT, SECRETARY, TREASURER  3240 NIM 46 AVENUE	Name and Title:		
LE V IN	TTIAL OFFICERS AND/OR DIRECTOR  ANDREWN GRIFFITHS - PRESIDENT, SECRETARY, TREASURER  3240 NIM 46 AVENUE	Name and Title:		
Name and Tit Address	ANDREWN GRIFFITHS - PRESIDENT, SECRETARY, TREASURER 3240 NW 46 AVENUE LAUDERDALE LAKES FL 33319	Name and Title:	-	
Name and Tit Address	THAL OFFICERS AND/OR DIRECTOR  ANDREWN GRIFFITHS - PRESIDENT, SECRETARY, TREASURER  3240 NW 46 AVENUE  LAUDERDALE LAKES FL 33319	Name and Title: Address: Name and Title:	-	
Name and Tit Address	THAL OFFICERS AND/OR DIRECTOR  ANDREWN GRIFFITHS - PRESIDENT, SECRETARY, TREASURER  3240 NW 46 AVENUE  LAUDERDALE LAKES FL 33319	Name and Title:	-	
Name and Tit	THAL OFFICERS AND/OR DIRECTOR  ANDREWN GRIFFITHS - PRESIDENT, SECRETARY, TREASURER  3240 NW 46 AVENUE  LAUDERDALE LAKES FL 33319	Name and Title: Address: Name and Title:	-	
Name and Tit Address Name and Tit! Address	THAL OFFICERS AND/OR DIRECTOR  ANDREWN GRIFFITHS - PRESIDENT, SECRETARY, TREASURER  3240 NW 46 AVENUE  LAUDERDALE LAKES FL 33319	Name and Title: Address:  Name and Title: Address:		
Name and Tit Address Name and Tit! Address	THAL OFFICERS AND/OR DIRECTOR  ANDREWN GRIFFITHS - PRESIDENT, SECRETARY, TREASURER  3240 NW 46 AVENUE  LAUDERDALE LAKES FL 33319	Name and Title: Address:  Name and Title: Address:		

Name	and Title:	Name and Title:
Addro	ess	Address:
ARTICLE VI	REGISTERED AGENT Florida street address (P.O. Box NOT acceptable) of	The registered agent is:
Name;	ANDREW N GRIFFITHS	, me registered agent is:
Address:	3240 NW 46 AVENUE	•
	LAUDERDALE LAKES FL 33319	
ARTICLE VI	I INCORPORATOR	
The name and	athlress of the Incorporator is:	
Name:	ANDREW N GRIFFITHS	
Address:	3240 NW 46 AVENUE	
	LAUDERDALE LAKES FL 33319	
Having been no this certificate,	umed as registered agent to accept service of process  I am familiar with and accept the appointment as regi	for the above stated corporation at the place designated in istered ogent and agree to act in this capacity
<del></del>		10/09/14
	Required Signature/Registered Agent	Date
I submit this de document to the	ecument and affirm that the facts stated herein are to Department of State constitutes a third degree felony	rue. I am aware that the false information submitted in a sub-provided for in s.817.155, F.S.
		10/09/14
	Required Signature/Incorporator	Date