

P 14000098239

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

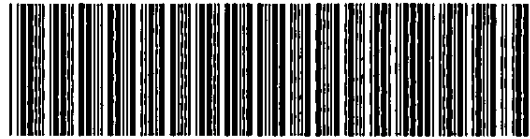
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700267063697

12/05/14--01016--003 **78.75

FILED
14 DEC-5 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 8 2014

S. GILBERT

COVER LETTER

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

SUBJECT: **ZEPHORIA, 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: **DAN NOYES**

Name (Printed or typed)

4322 REFLECTIONS PARKWAY

Address

SARASOTA, FL 34233

City, State & Zip

585-230-9565

Daytime Telephone number

dnoyes@zephoria.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)

ARTICLE I NAME

The name of the corporation shall be: ZEPHORIA, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

4322 REFLECTIONS PARKWAY

SARASOTA, FL 34233

FILED
14 DEC -5 PM 3:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any and all lawful business activity for which a corporation may be organized.

ARTICLE IV SHARES

The number of shares of stock is: 200

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: DAN NOYES, CEO Name and Title: _____

Address 4322 REFLECTIONS PARKWAY Address: _____
SARASOTA, FL 34233

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: DAN NOYES

Address: 4322 REFLECTIONS PARKWAY

SARASOTA, FL 34233

ARTICLE VII INCORPORATOR

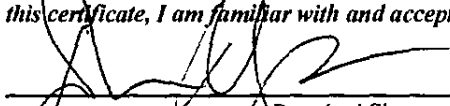
The name and address of the Incorporator is:

Name: DAN NOYES

Address: 4322 REFLECTIONS PARKWAY

SARASOTA, FL 34233

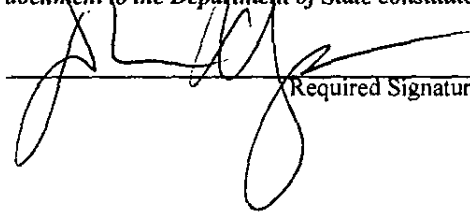
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

12/2/14
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.



Required Signature/Incorporator

12/2/14
Date