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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15-15

COVER LETTER

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

SUBJECT: PARADISE AND SERENTITY RESEARCH GROUP, INCORPORATED

(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: CARL B THOMPSON, CHAIRMAN, PRESIDENT, CEO

ADDRESS

P.O. BOX 56132, ST PETERSBURG, FL 33732

(727) 674-5154

Daytime Telephone number

EMAIL ADDRESS: cbtgator@mail.com

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: **PARADISE AND SERENTITY RESEARCH GROUP, INCORPORATED**

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

871 40TH AVENUE NORTH, S. PETERSBURG, FL 33703

P.O. BOX 56132, ST PETERSBURG, FL 33732

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To provide medical and commercial customers with unique and high-quality **Internet** access to cannabis research data and reports.

ARTICLE IV SHARES

The number of shares of stock is: 5000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: CARL. B THOMPSON, CHAIRMAN, PRESIDENT, CEO

Address: P.O. BOX 56132, ST PETERSBURG, FL 33732

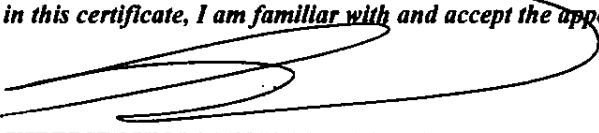
ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: CARL. B THOMPSON

Address: 871 40TH AVENUE NORTH, S. PETERSBURG, FL 33703

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

1/8/2015
Date

ARTICLE VII INCORPORATOR

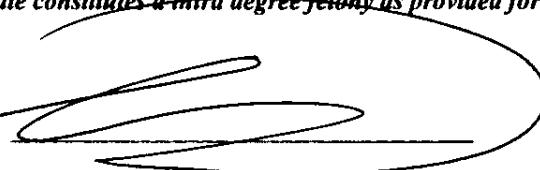
The name and address of the Incorporator is:

Name: CARL. B THOMPSON

Address: 871 40TH AVENUE NORTH, S. PETERSBURG, FL 33703

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



Date

1/8/2015

FILED
15 JAN 12 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA