## P1500033752

(Requestor's Name)				
(Address)				
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	e)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only

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APR 14 2015 S. GILBERT



## **COVER LETTER**

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

SUBJECT: CMS	SC Corporation	<b>1</b>	
	(PROPOSE O)	RATE NAME - MUST INCL	UDE SUFFIX)
Enclosed are an original	•	es of incorporation and	
\$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of Status
		ADDITIONAL CO	OPY REQUIRED
	hristopher McH	ame (Printed or typed)	·····
	,	Address	
Na	aples, FL 3411		
	C	ity, State & Zip	
23	39-580-9098		
	Daytim	e Telephone number	
Ch	nrismch@gmail.co	om	
		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 NAM	tion shall be: CMSQ Corporation	า	Mailing add Ssaff Alfforent is: PH 2: 0
•	NCIPAL OFFICE		15 APR / 3 PM
	Principal street address		Mailing add ssafe althorem is:
11216 Tamian	ni Trail N #212		AMASSEE, POTATE
Naples, FL 34	4110		
	POSE he corporation is organized is:  Consultir	ng/Business	Management & Development
·	Lactur		
ARTICLE IV SHA The number of shares of	URES 100		
	TAL OFFICERS AND/OR DIRECTOR	<u>s</u>	
Name and Title	Christopher McHugh,P,TS	Name and Title	; <u> </u>
Address	11216 Tamiami Trail N.	Address:	
	#212	•	
	Naples, FL 34110	·	
Name and Title		Nome and Title	
Address		Address:	
	-		
Name and Title:		Name and Title	:
Address		Address:	

Namé`ar	nd Title:	Name and Title:
Addres	s ·	Address:
<i>ARTICLE VI</i> The name and F	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	the registered agent is:
Name:	Christopher McHugh	
Address:	11216 Tamiami Trail N #212	
	Naples, FL 34110	
ARTICLE VII	INCORPORATOR	
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	Christopher McHugh	
Address:	11216 Tamiami Trail N. #212	
•	Naples, FL 34110	
	ned as registered agent to accept service of process ; am familiar with and accept the appointment as regi	for the above stated corporation at the place designated stered agent and agree to act in this capacity
		3/25/15
	Required Signature/Registered Agent	Date
	cument and affirm that the facts stated herein are to Department of State constitutes a third degree felony	ue. I am aware that the false information submitted in as provided for in s.817.155, F.S.
		3/25/15
	Required Signature/Incorporator	Date