

P15 0000 38052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

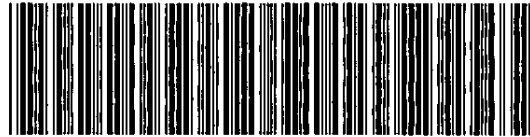
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800271437698

04/06/15--01039--005 **78.75

FILED

2015 APR 27 PM 3:44

CLERK OF STATE
NOTARIES DIVISION

WTS 0000024672
dews
4/29/15

COVER LETTER

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

SUBJECT: New Rely Enterprise Solutions 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
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 COPY REQUIRED

FROM: David Thomas
Name (Printed or typed)
4429 Cobia4429
Address
Tampa, Florida 33610
City, State & Zip
813-270-1773 813-363-4518
Daytime Telephone number
cobia4429@yahoo.com
E-mail address: (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2015

DAVID THOMAS
4429 COBIA 4429
TAMPA, FL 33610

SUBJECT: NEW RELY ENTERPRISE SOLUTIONS INC.
Ref. Number: W15000024672

We have received your document for NEW RELY ENTERPRISE SOLUTIONS INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporation may have only one mailing address and one principal place of business address.

Please return 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.

Carol Mustain
Regulatory Specialist II

Letter Number: 415A00007072

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: New Rely Enterprise Solutions INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

David A. Thomas

[REDACTED]

Mailing address, if different is:

4429 cobia Drive Tampa FL 33610

[REDACTED]

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To buy and sell property to customers, lease said property

maintaine property. provide in house machine, equipmet etc.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: David A. Thomas Pres.

Address: 4429 cobia Dr.

Tampa Florida

33610

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

FILED
2015 APR 27 PM 3:44
CLERK OF DISTRICT COURT
ALABAMA

(cont.)

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: Boxil Browne

Address: 1641 Morris Bridge Rd

Wesley Chapel fl. 33543

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Lamarcus W. Larry

Address: 5127 Puritan Circle

Tampa Florida 33617

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

Boxil Browne

Required Signature/Registered Agent

03-30-15

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.

Lamarcus W. Larry

Required Signature/Incorporator

03-30-2015

Date