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(Req	uestor's Name)	
(Add	ress)	
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(City	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Na	me)
·	•	,
(Doc	ument Number)
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	
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Office Use Only



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COVER LETTER

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

SUBJECT: Qualit	fyEm', Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLI</u>	JDE SUFFIX)
Enclosed are an original	ginal and one (1) copy of the art	icles of incorporation and	l 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 CO	PY REQUIRED
FROM: As	hley S. Walklett Name	e (Printed or typed)	
726	2 Jonas Road		
		Address	
For	t Myers, FL 33967		
	City,	State & Zip	
(61	0)324-2311		
	Daytime T	elephone number	
ashl	ey@qualifyem.com		

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

E-mail address: (to be used for future annual report notification)

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

TICLE I NAM name of the corpor	ICIDAL DEFICE		
2 Jonas Road	Principal <u>street</u> address	Mailing	address, if different is:
Myers, FL 33967		· · · · · · · · · · · · · · · · · · ·	
			
TICLE III PURI purpose for which	the corporation is organized is:	in any lawful business	
		- · · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
		- · · · · · · · · · · · · · · · · · · ·	
TICLE IV SHA	of ctock ice		
number of shares of	f stock is:		
number of shares o	of stock is: IAL OFFICERS AND/OR DIRECTORS Achley S. Walklett, Chairman (CEO)		
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number of shares o	of stock is: IAL OFFICERS AND/OR DIRECTORS Ashley S. Walklett, Chairman (CEO) 7262 Jonas Road		
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number of shares of the shares of the share and Tite Address	of stock is: IAL OFFICERS AND/OR DIRECTORS Ashley S. Walklett, Chairman (CEO) 7262 Jonas Road Fort Myers, FL 33967	Name and Title: Address: Name and Title:	15 SED - 2 PM
Name and Titl	Ashley S. Walklett, Chairman (CEO) 7262 Jonas Road Fort Myers, FL 33967	Name and Title: Address: Name and Title: Address:	15 SE - 2 PM 12
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Name and Titl Address Address	of stock is: IAL OFFICERS AND/OR DIRECTORS Ashley S. Walklett, Chairman (CEO) 7262 Jonas Road Fort Myers, FL 33967 e:	Name and Title: Address: Name and Title: Address:	15 SEP - 2 PM 11: 25
Name and Titl Address Address	of stock is: IAL OFFICERS AND/OR DIRECTORS Ashley S. Walklett, Chairman (CEO) 7262 Jonas Road Fort Myers, FL 33967 e:	Name and Title: Address: Name and Title: Address: Name and Title:	15 SEP - 2 PM 11: 25

Name an	nd Title:	Name and Title:	
Address		Address:	
ARTICLE VI	REGISTERED AGENT		
	lorida street address (P.O. Box NOT acceptable) of	f the registered agent is:	
Name:	Ashley S. Walklett	-	
Address:	7262 Jonas Road		
	Fort Myers, Fl. 33967	_	
ARTICLE VII	<u>INCORPORATOR</u>		
The name and ac	ddress of the Incorporator is:		
Name:	Ashley S. Walklett	_	Maria.
Address:	7262 Jonas Road		September 1997
	Fort Myers, FL 33967	-	
ARTICLE VIII	EFFECTIVE DATE:		
Effective date, if	other than the date of filing: date is listed, the date must be specific and canno	. (OPTIONAL)	
days after the fi	iate is listed, the date must be specific and canno ling.)	t be more than five business of	aysiprior orgo business
	e inserted in this block does not meet the applicable ffective date on the Department of State's records.	statutory filing requirements, the	is date will not be listed as
	med as registered agent to accept service of process am familiar with and accept the appointment as reg		
Ap	Mequired Signature/Registered Agent		8/30/15 Date
	cument and affirm that the facts stated herein are Department of State constitutes a third degree felon		
Requi	Ishley Warklett, CEO red Signature Incorporator		8/30/15 Date

ARTICLES OF INCORPORATION
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

	Oration shall be: WE VELOCITY OF STATE OF STATE OF STATE OF STATE OF STA		
•	NCIPAL OFFICE Principal <u>street</u> address	Mailing	address, if different is:
62 Jonas Road rt Myers, FL 3396	7		
TO WIYOIS, I'D 3370			
RTICLE III PUR	RPOSE to engage i th the corporation is organized is:	n any lawful business	
a purpose for which	in the corporation is organized is:		
PAR 4 14.			
	of stock is: TIAL OFFICERS AND/OR DIRECTORS itle: Ashley S. Walklett, Chairman (CEO)		
e number of shares	of stock is: TIAL OFFICERS AND/OR DIRECTORS	Name and Title:	
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e number of shares PTICLE V INIT Name and T Address	of stock is: TIAL OFFICERS AND/OR DIRECTORS itle: Ashley S. Walklett, Chairman (CEO) 7262 Jonas Road Fort Myers, FL 33967	Name and Title: Address: Name and Title:	
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PTICLE V INITED NAME and TANGES Name and Tanges Name and Tanges	of stock is: TIAL OFFICERS AND/OR DIRECTORS itle: Ashley S. Walklett, Chairman (CEO) 7262 Jonas Road Fort Myers, FL 33967	Name and Title: Address: Name and Title:	
PTICLE V INITED NAME and TANGES Name and Tanges Name and Tanges	of stock is: TIAL OFFICERS AND/OR DIRECTORS itle: Ashley S. Walklett, Chairman (CEO) 7262 Jonas Road Fort Myers, FL 33967	Name and Title: Address: Name and Title:	
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Name an	d Title:	Name and Title:
Address	3	Address:
		
	·	
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of	of the registered agent is:
Name:	Ashley S. Walklett	
Address:	7262 Jonas Road	
	Fort Myers, FL 33967	-
<u>ARTICLE VII</u>		
The <u>name and a</u>	ddress of the Incorporator is:	
Name:	Ashley S. Walklett	The Part of the Pa
Address:	7262 Jonas Road	· ·
	Fort Myers, FL 33967	
	EFFECTIVE DATE: other than the date of filing:	(OPTIONAL)
(If an effective of days after the fi	late is listed, the date must be specific and canno	ot be more than five business days prior or 90 business
		statutory filing requirements, this date will not be listed as
the document's e	ffective date on the Department of State's records.	
	med as registered agent to accept service of proces am familiar with and accept the appointment as re	es for the above stated corporation at the place designated in coistered agent and agree to act in this capacity
		d12015
	Required Signature/Registered Agent	Date
/ submit this dod document to the	cument and affirm that the facts stated herein are Department of State constitutes a third degree felo.	true. I am aware that the false information submitted in a ny as provided for in s.817.155, F.S.
	Johley Walklett, CEO	8/36/15
Kequi	ned Signature/Incorporator	' Date

COVER LETTER

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

SUBJECT: Quali	fyEm', Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCLU</u>	DE SUFFIX)
Enclosed are an original	ginal and one (1) copy of the art	icles of incorporation and	a check for:
Enclosed are all on	ghiar and one (1) copy of the art	letes of incorporation and	a check for.
\$70.00	\$78.75	\$78.75	\$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy & Certificate o Status
		ADDITIONAL CO	
	hley S. Walklett		
	Name (Printed or typed)		
726	2 Jonas Road		
		Address	
For	t Myers, FL 33967		
	City,	State & Zip	
(61	0)324-2311		
	Daytime T	elephone number	
ashl	ey@qualifyem.com		
	E-mail address: (to be use	d for future annual report n	otification)

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 II P	PRINCIPAL OFFICE Principal <u>street</u> address	Mailing a	ddress, if different is:
262 Jonas Road			,
Fort Myers, FL 33	9967		
		<u></u>	· · · · · · · · · · · · · · · · · · ·
ARTICLE III P The purpose for w	hich the corporation is organized is:	n any lawful business	
	The state of the s		
			-75
ARTICLE IV S	CHARES 1,000 res of stock is:		
	NITIAL OFFICERS AND/OR DIRECTORS d Title: Ashley S. Walklett, Chairman (CEO)		
	Title: 7262 Jonas Road	Name and Title:	
Address	Fort Myers, FL 33967	Address:	
	FOR MYCIS, FL 33707		
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Name and	Title:	Name and Title:	
Address		Address:	2 2
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Name and	Title:	Name and Title:	
Address		Address:	
Name:	Ashley S. Walklett		to Pro
Address:	7262 Jonas Road	_	
	Fort Myers, FL 33967	_	
DTICLE VIII E	FFECTIVE DATE:		
ffective date if otl	her than the date of filing: e is listed, the date must be specific and cannot	. (OPTIONAL)) ss days prior or 90 business
r an effective dat tys after the filin	e is fisted, the date must be specific and canno g.)	of be more than he busine.	as days prior or oo business
	serted in this block does not meet the applicable	statutory filing requirements	s, this date will not be listed as
e document's effe	ctive date on the Department of State's records.		
aving been name is certificate, I an	d as registered agent to accept service of proces n familiar with and accept the appointment as re	es for the above stated corpor gistered agent and agree to a	ration at the place designated in oct in this capacity
ad	Ley Wurklett, CEO Required Signature/Registered Agent		8/30/15
	URequired Signature/Registered Agent		Date
		. A I am access 44 at 44 - 4	lalan information as hmittad in a
ו submit this docui	ment and affirm that the facts stated herein are epartment of State constitutes a third degree felo	true. I am aware that the f ny as provided for in s.817.13	alse information submitted in a 55, F.S.