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TALLAHASSEE, FLORIDA
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T CANNON

COVER LETTER

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

SUBJECT: See Try Be, 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: Jerrold E. Slutzky, Slutzky Law Firm

Name (Printed or typed)

20719 Sterlington Drive, Suite 103

Address

Land O Lakes, FL 34638

City, State & Zip

(813) 909-1515

Daytime Telephone number

SEETRYBEC@GMAIL.COM

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

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

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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: See Try Be, Inc.

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

Mailing address, if different is:

1016 Thomas Drive #202

Panama City Beach, FL 32408

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: To operate and maintain an internet-based, on-line health and wellness

business community that enables people to connect with other active people and inform them of upcoming and useful events

and information related to health and wellness issues, and all other actions necessary and/or incidental thereto.

Also to engage in any other lawful business activities as may be permitted under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: NATALIE KESSLER, Pres, Treas, Dir

Name and Title: TIPHANIE SPRADLIN, VP, Secy, Dir

Address: 7213 Quail Hollow Drive

Address: 1016 Thomas Drive #202

Panama City Beach, FL 32408

Panama City Beach, FL 32408

Name and Title:

Name and Title:

Address:

Address:

Name and Title:

Name and Title:

Address:

Address:

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: TIPHANIE SPRADLIN
Address: 1016 Thomas Drive #202
Panama City Beach, FL 32408

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: TIPHANIE SPRADLIN
Address: 1016 Thomas Drive #202
Panama City Beach, FL 32408

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ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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

X 
Required Signature/Registered Agent

14 Oct 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.

X 
Required Signature/Incorporator

14 Oct 15
Date