

P16000018328

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

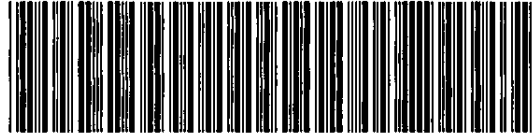
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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02/19/16--01014--003 **70.00

16 FEB 19 PM 1:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

1/14

COVER LETTER

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

SUBJECT: BUY365DIRECT, 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 ☐ \$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: JENNENE FERDINAND

Name (Printed or typed)

401 69TH STREET, # 812

Address

MIAMI BEACH, FLORIDA 33141

City, State & Zip

305-798-5748

Daytime Telephone number

buy365direct@gmail.com

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

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

APPROVED
AND
FILED

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: BUY365DIRECT, INC.

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ARTICLE II PRINCIPAL OFFICE

Principal street address

401 69TH STREET, # 812

MIAMI BEACH, FL 33141

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ONLINE ELECTRONICS STORE

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JENNENE FERDINAND

Address 401 69TH STREET, # 812
MIAMI BEACH, FL 33141

Name and Title: TORI WOLAN

Address: 401 69TH STREET, # 812
MIAMI BEACH, FL 33141

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

Name and Title: _____

Address _____

Name and Title: _____

Address: _____

APPROVED
AND
FILED

Name and Title: _____ Name and Title: 16 FEB 19 PM 1:47

Address: _____ Address: SECRETARY OF STATE

TALLAHASSEE, FLORIDA

ARTICLE VI REGISTERED AGENT

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

Name: JENNENE FERDINAND
Address: 401 69TH STREET, # 812
MIAMI BEACH, FL 33141

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: JENNENE FERDINAND
Address: 401 69TH STREET, # 812
MIAMI BEACH, FL 33141


ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 2/15/2016. (OPTIONAL)

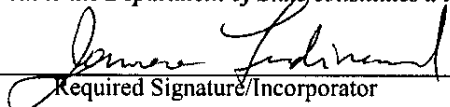
(If an effective date is listed, the date must be specific and cannot be more than five business days prior or 90 business days after the filing.)

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

 2/15/2016
Required Signature/Registered Agent 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.

 2/15/2016
Required Signature/Incorporator Date