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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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03/15/16--01007--011 \*\*76.75

APR 4 2016

S. PRATHER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 22, 2016

CHAUVIN SOUVANDY  
8087 MONETARY DRIVE., SUITE F-6  
WEST PALM BEACH, FL 33404

SUBJECT: SELF POWER, INC.  
Ref. Number: W16000021390

We have received your document for SELF POWER, 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 name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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.

Stacy Prather  
Regulatory Specialist III

Letter Number: 716A00005874

## COVER LETTER

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

SUBJECT: Self Power, 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: Chauvin Souvandy

Name (Printed or typed)

8087 Monetary Dr., Suite F-6

Address

West Palm Beach, FL 33404

City, State & Zip

(561) 779-8087

Daytime Telephone number

lulutotohaobao@gmail.com

E-mail address: (to be 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 NAME**

The name of the corporation shall be:

Self Power, Inc.

AMERICAN SELF POWER INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

8087 Monetary Dr., Suite F-6

West Palm Beach, FL. 33404

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

maufacture & sales

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TALLAHASSEE FLORIDA

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**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Chauvin Souvandy, President

Name and Title: Tina Do, Secretary/Treasurer

Address: 8087 Monetary Dr.

Address: 8087 Monetary Dr.

Suite F-6

Suite F-6

West Palm Beach, FL. 33404

West Palm Beach, FL. 33404

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: Gary C. Barat C.P.A.  
Address: 801 Northpoint Parkway, Suite 127  
West Palm Beach, FL. 33407

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Chauvin Souvandy  
Address: 8087 Monetary Dr., Suite F-6  
West Palm Beach, FL. 33404

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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.

Gary C. Barat  
Required Signature/Registered Agent

3/7/16  
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.817.135, F.S.

Chauvin Souvandy  
Required Signature/Incorporator

KS-8-16  
Date