

P160000 78638

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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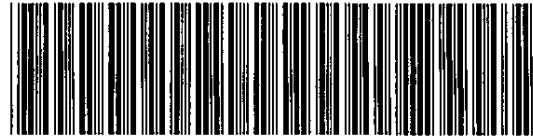
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2016 SEP 26 PM 1:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

V HERRING

SEP 27 2016

## COVER LETTER

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

SUBJECT: \_\_\_\_\_

*Karen Hurley 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: \_\_\_\_\_

*Karen Popp*

Name (Printed or typed)

*310 7 West Wallcraft Ave*

Address

*Tampa, FL, 33611*

City, State & Zip

*(813) 786. 4792*

Daytime Telephone number

*Kr4popp@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: Karen ~~Popp~~ Hurley Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3107 West Wallcraft Ave  
Tampa, FL 33611

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: for profit,  
equipment financing

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Karen Popp - Sole owner + President Name and Title:  
Address: 3107 West Wallcraft Ave Address:  
Tampa FL 33611

Name and Title: Name and Title:

Address: Address:

Name and Title: Name and Title:

Address: Address:

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2016 SEP 26 PM 1:13  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

Name and Title: \_\_\_\_\_ Name and Title: FILED

Address \_\_\_\_\_ Address: 2016 SEP 26 PM 1:13

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: Karen Popp

Address: 3107 West Wallcraft Ave  
Tampa, FL 33611

**ARTICLE VII INCORPORATOR**

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

Name: Karen Popp

Address: 3107 West Wallcraft Ave  
Tampa, FL 33611

**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*

Karen Popp  
Required Signature/Registered Agent

9/22/16  
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.817.155, F.S.*

Karen Popp  
Required Signature/Incorporator

9/22/16  
Date