

01/19/2017

1336 Beloff Park, Jacksonville

FA 305 673 5505

P.001/004

Division of Corporations

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6381

From:

Account Name : BELOFF LAW, P.A.  
Account Number : I20080000060  
Phone : (305) 673-1101  
Fax Number : (305) 673-5505

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: SHERRY@BELOFFLAW.COM

FLORIDA PROFIT/NON PROFIT CORPORATION  
THE SCARLET LETTER, INC.

Certificate of Status	1
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N. SAMS

JAN 20 2017

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## COVER LETTER

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

SUBJECT: THE SCARLET LETTER, 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: JONATHAN D. BELOFF

Name (Printed or typed)

1691 MICHIGAN AVE., SUITE 360

Address

MIAMI BEACH, FLA. 33139

City, State &amp; Zip

305-673-1101

Daytime Telephone number

JDB@BELOFFLAW.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) 7

ARTICLE I NAME

The name of the corporation shall be: THE SCARLET LETTER, INC.

ARTICLE II PRINCIPAL OFFICEPrincipal ~~street~~ address

Mailing address, if different is:

7504 Mutiny Avenue

North Bay Village, Fla. 33141

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: to engage in any activity and to exercise any powers permitted to corporations under the laws of the State of Florida.

ARTICLE IV SHARES

The number of shares of stock is: 1,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: JESSICA BAZAN, Pres./Sec./Dir.

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

Address 7504 Mutiny Avenue

Address: \_\_\_\_\_

North Bay Village, Fla. 33141

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

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

Address \_\_\_\_\_ Address: \_\_\_\_\_

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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: JESSICA BAZAN

Address: 7504 Mutiny Avenue

North Bay Village, Fla. 33141

**ARTICLE VII INCORPORATOR**The name and address of the incorporator is:

Name: JESSICA BAZAN

Address: 7504 Mutiny Avenue

North Bay Village, Fla. 33141

**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 days prior or 90 days after the filing.)

Note: If the date inscribed 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*

Jessica Bazan

Required Signature/Registered Agent

January 19, 2017

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.*

Jessica Bazan

Required Signature/Incorporator

January 19, 2017

Date

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