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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 02/04/17

2 02/07/17

February 4, 2017

I hereby state that I have no intention of reinstating the dissolved corporation. Articles enclosed.

Affluent Marketing  
6261 Dogwood Way  
Naples, FL 34116

Sincerely,

A handwritten signature in black ink, appearing to read 'Susana McHugh', with a long horizontal flourish extending to the right.

Susana McHugh

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

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

SUBJECT: Affluent Marketing 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: \_\_\_\_\_  
Name (Printed or typed)

6261 Dogwood Way  
Address

Naples, FL 34116  
City, State & Zip

(239) 290-0327  
Daytime Telephone number

smchugh@birthdaypalc.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: Affluent Marketing Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Mailing address, if different is:

6261 Dogwood Way  
NAPLES, FL 34116

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**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful business

**ARTICLE IV SHARES**

The number of shares of stock is:

100<sup>00</sup>

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

Name and Title: Susana Rendon McHugh

Name and Title: president

Address

6261 Dogwood Way  
NAPLES, FL 34116

Address:

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: Susana Remon McHugh  
Address: 6261 Dogwood Way  
Naples, FL 34116

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**ARTICLE VII INCORPORATOR**

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

Name: Susana Remon McHugh  
Address: 6261 Dogwood Way  
Naples, FL 34116

**ARTICLE VIII EFFECTIVE DATE:**

Effective date, if other than the date of filing: 2/4/17 (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 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*

Susana Remon McHugh  
Required Signature/Registered Agent

2-4-17  
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.*

Susana Remon McHugh  
Required Signature/Incorporator

2-4-17  
Date