P17000066184

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:			
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Office Use Only



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07/11/17--01004--003 **78.75



July 12, 2017

MARGARET BELL 834 NW 112TH ST. MIAMI, FL 33168

SUBJECT: BELL & COMPANY, INC.

Ref. Number: W17000057315

We have received your document for BELL & COMPANY, 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.

The document number of the name conflict is L07000046920.

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.

KYLE D BRUMBLEY Regulatory Specialist II

Letter Number: 517A00014013

RECEIVED

17 JUL 31 PM 3: 13

NAME AND TO STREET OF STRE

COVER LETTER

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

SUBJECT: BELL	& COMPANY, INC.			
SUBJECT:	(PROPOSED CORPORA	ATE NAME + <u>MUST INCL</u>	UDE SUFFIX)	
Enclosed are an orig	ginal and one (1) copy of the ar	ticles of incorporation and	d a check for:	
☐ \$70.00 Filing Fee	□ \$78.75 Filing Fee & Certificate of Status	S78.75 Filing Fee & Certified Copy	& Certificate o Status	
		ADDITIONAL CO	DPY REQUIRED	
FROM:		e (Printed or typed)		
83	4 NW 112TH ST.	Address		
М	IAMI, FL 33168	Address		
	City, State & Zip			
78	6-707-5504			
	Daytime *	l'elephone number		
bro	tnbell@yahoo.com			
	E-mail address: (to be use	ed 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)

	tion shall be: MARGARET BELL & C	OMPANY, INC.
ARTICLE II PRINC	Principal <u>street</u> address	Mailing address, if different is:
834 NW 112TH ST.		
MIAMI, FL 33168		
	the corporation is organized is:	IDE EMPLOYMENT AND SERVICE FOR THE PUBLIC
AT LARGE. TO HELI	P PEOPLE FIND RENTAL PROPERTIES	S FOR RENT. TO PROVIDE GUIDANCE IN BUYING A
NEW HOME FOR FIR	ST TIME BUYERS. TO BUY, SELL, RI	ENT, LEASE, WHOLESALE AND RETAIL, TRADE.
MANAGE AND AUC	TION ALL TYPES OF REAL ESTATE	PROPERTIES. TO INVEST IN ALL TYPES OF PUBLISH
ADVERTISING AND	PROMOTIONAL VENTURES, INCLUI	DING VARIOUS INTELLECTUAL PROPERTIES. TO
INVEST IN ANY ANI	D ALL MONEY-MAKING ENTITIES A	ND IDEAS FOR PROFIT WITHOUT RESTRICTION,
WITHOUT PERSONA	AL GUARANTOR. YET WITHIN THE L	AW.
	MARGARET BELL, PRESIDENT 834 NW 112TH ST. MIAMI, FL 33168	Name and Title:Address:
Name and Title	e:	Name and Title:
		Address:

Name ar	nd Title:	Name and Title:
Address	s	Address:
	REGISTERED AGENT	akha) = faka aya'aya = 1 aya'a
	Torida street address (P.O. Box NOT accepts MARGARET BELL	of the registered agent is:
Name:	834 NW 112TH ST	
Address:	MIAMI, FL 33168	
		
ARTICLE VII	INCORPORATOR	
The name and a	ddress of the Incorporator is:	
Name:	MARGARET BELL	
Address:	834 NW 112TH ST	 -
Address:	MIAMI, FL 33168	
	EFFECTIVE DATE: f other than the date of filing:	(OPTIONAL)
(If an effective of	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 the document's e	e inserted in this block does not meet the apple effective date on the Department of State's re-	licable statutory filing requirements, this date will not be listed as cords.
Having been nat this certificate, l	med as registered agent to accept service of p am_familiar with and accept the appointmen	process for the above stated corporation at the place designated in t as registered agent and agree to act in this capacity
	Mary	06/29/2017
	Required Signature Registered Age	
I submit this doc	cument and affirm that the facts stated here	in are true. I am aware that the false information submitted in a
document to the	Department of State constitutes a third degre	e felony as provided for in s.817.155, F.S.
//	/ Louisant USI	06/29/2017
Requ	ired Signature/Incorporator	Date