

P17000080571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

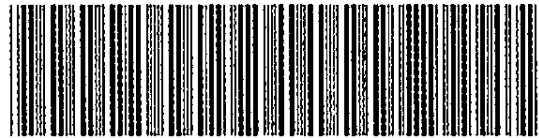
Certified Copies _____ Certificates of Status _____

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OCT 09 2017



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10/06/17--01008--001 **70.00

17 UC,
TAMM, SAMS, 11/18/17

COVER LETTER

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

SUBJECT: Soflo Nutra 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: Alex Jordan

Name (Printed or typed)

2519 N Ocean Blvd #308

Address

Boca Raton FL 33431

City, State & Zip

407-607-3951

Daytime Telephone number

soflonutrainc@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: Soflo Nutra Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

2519 N Ocean Blvd #308
Boca Raton 33431

17 OCT -6 PM 4:11
Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Internet sales and
e-commerce. Supplements, skin creams and
other nutraceuticals.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alex Jordan

Address: 2519 N Ocean Blvd
#308 Boca Raton FL
33431

Alex Jordan

Name and Title: Pres

Address: 2519 N Ocean Blvd
#308 Boca Raton FL
33431

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

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: Alex Jordan

Address: 2519 N Ocean Blvd
#308 Boca Raton FL 33431

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alex Jordan

Address: 2519 N Ocean Blvd #308
Boca Raton FL 33431

FILED
17 OCT -6 PM 4:11
FACILITY FOR FILING

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 10/3/2017 (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

Alex Jordan
Required Signature/Registered Agent

10/3/17
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.

Alex Jordan
Required Signature/Incorporator

10/3/17
Date