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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : LAW OFFICE OF LARRY WANG, LLC
Account Number : I20130000086
Phone : (904)217-4514
Fax Number : (866)230-6060

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

Email Address: Romainjacqueline@hotmail.com

FLORIDA PROFIT/NON PROFIT CORPORATION

Samuel & Saul, Inc.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$70.00

FILED
2018 SEP -5 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FL

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: Samuel & Saul, Inc.

ARTICLE II – PRINCIPAL OFFICE

Principal street address

Mailing address, if different

289 Scrub Jay Drive
Saint Augustine, FL 32092

ARTICLE III – PURPOSE

The purpose for which the corporation is organized is: Any and all lawful activity to include but not be limited to the sale of merchandise and/or services.

ARTICLE IV – SHARES

The number of shares of stock is: 100

ARTICLE V – INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jacqueline B. Romain, President
Address: 289 Scrub Jay Drive
Saint Augustine, FL 32092

Name and Title:
Address:

ARTICLE VI – REGISTERED AGENT

The name and Florida street address of the registered agent is:

Name: Jacqueline B. Romain
Address: 289 Scrub Jay Drive
Saint Augustine, FL 32092

ARTICLE VII – INCORPORATOR

Name: Jacqueline B. Romain
Address: 289 Scrub Jay Drive
Saint Augustine, FL 32092

ARTICLE VIII – EFFECTIVE DATE

Effective date, if other than the date of filing:

(If an effective date is listed, the date must be specified 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 record.

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.

Jacqueline BOULEN ROMAN
Required Signature/Registered Agent

08/30/2018
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.

Jacqueline BOULEN ROMAN
Required Signature / Incorporator

08/30/2018
Date