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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

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

SUBJECT: SEREN PUBLISHING CO., 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: KARIN L. NICELY
Name (Printed or typed)

2455 NW 44TH AVENUE
Address

OCALA, FL 34482
City, State & Zip

(352) 390-4818
Daytime Telephone number

KNWRITE@HOTMAIL.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: SEREN PUBLISHING CO., INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address: 2455 NW 44TH AVENUE
Mailing address, if different is:
OCALA, FL 34482

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: FOR THE PURPOSES OF TRANSACTING ANY AND ALL
LAWFUL BUSINESS, SPECIFICALLY PUBLISHING, FOR WHICH THIS CORPORATION MAY BE INCORPORATED
UNDER THE LAWS OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: KARIN L. NICELY, PRESIDENT Name and Title: _____

Address: 2455 NW 44TH AVENUE Address: _____
OCALA, FL 34482

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

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2019 OCT 22 PM 12:05
SEREN PUBLISHING CO., INC.
TALLAHASSEE, FLORIDA

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: DANA E. HOPKINS
Address: 7822 SW 9TH CIRCLE
OCALA, FL 34481

ARTICLE VII INCORPORATOR

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

Name: KARIN L. NICELY
Address: 2455 NW 44TH AVENUE
OCALA, FL 34482

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 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

Dana E Hopkins 11 OCTOBER 2019
Required Signature/Registered Agent 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.

Karin L Nicely 11 OCTOBER 2019
Required Signature/Incorporator Date