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# FLORIDA PROFIT/NON PROFIT CORPORATION SQUARED AWAY ENTERPRISES INC

Certificate of Status	1
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Estimated Charge	\$78.75

19 DEC 13 ATT1: 23

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#### ARTICLES OF INCORPORATION

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

#### ARTICLE I NAME

The name of the corporation shall be:

#### **SQUARED AWAY ENTERPRISES INC**

#### ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

609 15TH AVE NW LARGO, FL 33770

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#### ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

200 Shares at no par value

#### ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

MICHAEL C GARNER 609 15TH AVE NW LARGO, FL 33770

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## ARTICLE V INITIAL OFFICER(S)/DIRECTOR(S)

The name(s) and street address(es) and title(s) to these Articles of Incorporation is(are):

MICHAEL GARNER - PRESIDENT/ DIRECTOR **609 15TH AVE NW** LARGO, FL 33770

### ARTICLE VI INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

MICHAEL GARNER-609 15TH AVE NW, LARGO, FL 33770

The undersigned incorporator(s) has(have) executed these Articles of Incorporation this

13TH day of DECEMBER 20 19

Signature

**SIGNATURE** 

1. The name of the corporation is: **SQUARED AWAY ENTERPRISES INC** 

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LA WS OF THE ST ATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN THE DESIGNATING THE REGISTERED OFFICE/AGENT, IN THE STATE OF FLORIDA.

	MICHAEL C GARNER	<del></del>	
	Name		
	(P.O. Box or Mail Drop Box NOT Acceptable)		
	LARGO, FL 33770		
	(City / State / Zip)		
-	istered agent and to accept service of process for the above sta		ed.
corporation at the place de agent and agree to act in t relating to the proper and	esignated in this certificate, I hereby accept the appointment as his capacity. I further agree to comply with the provisions of al complete performance of my duties, and am familiar with and a	registere ll the stati	utes
corporation at the place de agent and agree to act in t relating to the proper and	esignated in this certificate, I hereby accept the appointment as his capacity. I further agree to comply with the provisions of al complete performance of my duties, and am familiar with and a	registere Il the stati accept th : :	utes
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(Date)