P20000041146

(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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FILED
2020 JAN 22 AM 10:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2020 JAN 22 PM 4:05

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

(OFFICE USE ONLY)

Corporation Name & Document Number, (if known):

1. SMU Telecom Services, Inc.
(Corporation Name) Document #

2. _____
(Corporation Name) Document #

_X__ Walk in

___ Mail out

___ Photocopy

___ Pick up time_____

____ Will wait

____Certified Copy

____ Apostil

_X__ Certificate of Status

2020 JAN 22 PM 4:06

NEW FILINGS

____Profit
____Not for Profit
___ Limited Liability
____Domesitication
__X__Other

AMMENDMENTS

____ Amendment
____Resignation of R.A. Officer/Director
____Change of Registered Agent
____Dissolution/Withdrawal
____Merger

OTHER FILINGS

____Annual Report

____Fictitious Name

REGISTERATION/QUALIFICATIONS

___Foreign
____Limited Partnership
____Reinstatement
____Trademark
____Other

EXAMINER'S INITIALS:_____

COVER LETTER

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

SUBJECT: Smu Telecom Services, 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: Carolyn A Sierk CPA
Name (Printed or typed)

11490 Okeechobee Blvd Ste 5
Address

Royal Palm Beach, FL 33411
City, State & Zip

561 791-0445
Daytime Telephone number

Sierkcpa@Aol.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: SMU Telecom Services Inc.

ARTICLE II PRINCIPAL OFFICE
Principal street address
17940 Gulf Blvd Unit 2A
Redington shores FL
33708

Mailing address, if different is:
11490 Okeechobee blvd Ste 5
Royal Palm Beach FL
33411

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
Any and all lawful business

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TALLAHASSEE, FLORIDA

ARTICLE IV SHARES
The number of shares of stock is: 1000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Brent Brown President
Address 17940 Gulf Blvd Unit 2A
Redington shores FL
33708

Name and Title:
Address

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: Carolyn A. Sierk CPA

Address: 11460 Okeechobee Blvd Ste 5

Royal Palm Beach FL 33411

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Carolyn A Sierk CPA

Address: 11460 Okeechobee Blvd Ste 5

Royal Palm Beach FL 33411

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 1/22/20 (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

Carolyn A Sierk CPA — Required Signature/Registered Agent

1/22/20 — 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.

Carolyn A Sierk CPA — Required Signature/Incorporator

Date 1/22/20