

P. 20000682755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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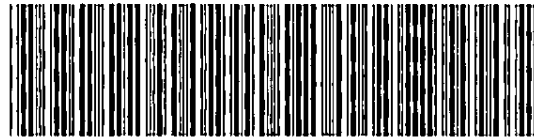
(Business Entity Name)

(Document Number)

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2020 OCT -5 AM 11:41
CLERK OF STATE
TALLAHASSEE, FLORIDA

OCT 23 2020

T. SCOTT

COVER LETTER

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

SUBJECT: STOCKUP 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☐ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: BRUNY COLQUHOUN
Name (Printed or typed)

1451 WEST CYPRESS CREEK ROAD
Address

FORT LAUDERDALE, FL 33319
City, State & Zip

954.543.2973
Daytime Telephone number

info@stockupinc.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: STOCKUP INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address
1451 WEST CYPRESS CREEK ROAD
FORT LAUDERDALE, FL 33319

Mailing address, if different is:
291 SW 83RD AVE
NORTH LAUDERDALE, FL 33063

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: ANY AND ALL LAWFULL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Clerge, Benedick Vice President Name and Title: Jeancharles, Kens Carter Director

Address: 291 SW 83rd Ave Address: 16089 Garrett Grove CT
North Lauderdale, FL 33068 Jacksonville, FL 32218

Name and Title: Colquhoun, Machel President Name and Title: Morival, Laura Director

Address: PO Box 670291 Address: 3645 Fountain Mist Drive
Coral Springs FL 33067 Unit 201
Tampa FL 33614

Name and Title: Daris, Ketner Director Name and Title: Obas, Evenel obas Director

Address: 8220 SW 22 St D111 Address: 3905 North Nobhill Rd Unit 201
North Lauderdale FL 33068 Sunrise FL 33351

Name and Title: Harry, Nathalie President Name and Title: Pierre, Karen Jean Director

Address: 6621 Winfield Blvd Unit 6 Address: 67 Pleasant Hill Lane
Margate, FL 33063 Tamarac Florida 33319

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CLERK OF DISTRICT COURT
STATE OF FLORIDA

Name and Title: Saint Julien, Yves, Director

Address 1103 E Jasmine Lane

North Lauderdale, FL, 33068

Name and Title: St Julien, Jimmy Director

Address: 1103 East Jasmine Lane

North Lauderdale, FL 33068

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: BRUNY COLQUHOUN

Address: 1451 WEST CYPRESS CREEK ROAD

FORT LAUDERDALE, FL 33319

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: BRUNY COLQUHOUN

Address: 1451 WEST CYPRESS CREEK ROAD

FORT LAUDERDALE, FL 33319

ARTICLE VIII EFFECTIVE DATE:

Effective date, if other than the date of filing: 09/20/2020 (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:

Bruny Colquhoun
Required Signature Registered Agent

09/20/2020

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.

Bruny Colquhoun
Required Signature/Incorporator

09/20/2020

Date