

# P20000098180

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

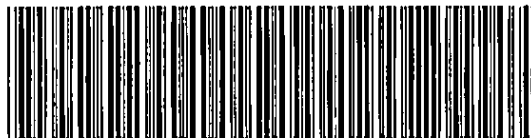
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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12/15/20--01014--015 \*\$87.50

Derrick Thompson  
12/22/2020

## COVER LETTER

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

SUBJECT: CUTKLAN, 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: ANTHONY CUTLER JR.  
Name (Printed or typed)

151 NW 188 STREET  
Address

MIAMI, FL 33169  
City, State & Zip

305-975-9350  
Daytime Telephone number

CUTKLAN22@GMAIL.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: CUTKLAN, INC.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address  
151 NW 188 ST

Mailing address, if different is:

MIAMI, FL 33169

**ARTICLE III PURPOSE**

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

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: ANTHONY CUTLER PRES. Name and Title: \_\_\_\_\_

Address: 151 NW 188 ST Address: \_\_\_\_\_  
MIAMI, FL 33169

Name and Title: AILEA CUTLER V.P. Name and Title: \_\_\_\_\_

Address: 151 NW 188 ST Address: \_\_\_\_\_  
MIAMI, FL 33169

Name and Title: CARDLINE CUTLER DIR. Name and Title: \_\_\_\_\_

Address: 151 N.W. 188 ST. Address: \_\_\_\_\_  
MIAMI, FL 33169

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: ANTHONY CUTLER JR  
Address: 151 NW 188 ST  
MIAMI, FL 33169

**ARTICLE VII INCORPORATOR**

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

Name: ANTHONY CUTLER JR.  
Address: 151 NW 188 ST  
MIAMI, FL 33169

**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*

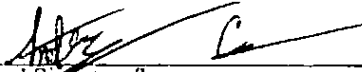


Required Signature/Registered Agent

12-11-2020

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.*



Required Signature/Incorporator

12-11-2020

Date