

3/17/2021

Division of Corporations

P21000023885

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H21000108122 3)))



H210001081223ABCR

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To:

Division of Corporations

Fax Number: (850)617-6381

From:

Account Name : TAXPEOPLE LLC

Account Number : I20200000160

Phone : (772)460-1000

Fax Number : (772)777-3071

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address:

**FLORIDA PROFIT/NON PROFIT CORPORATION
MEYNARD TRADING, INC.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$70.00

MAR 18 2021

T. SCOTT

2021 MAR 17 AM 11:02
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DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: MEYNARD TRADING, 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:****TAXPEOPLE, LLC**

Name (Printed or typed)

2855 SW BRIGHTON ST

Address

PORT ST LUCIE, FL 34953

City, State & Zip

772.460.1000

Daytime Telephone number

INFO@TAXPEOPLEFL.COM

E-mail address: (to be used for future annual report notification)

NOTE: Please provide the original and one copy of the articles.

(((H21000108122 3)))

ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE I NAMEThe name of the corporation shall be: MEYNARD TRADING, INC.**ARTICLE II PRINCIPAL OFFICE**Principal street address1214 SE CHASE RD.PORT ST LUCIE, FL 34953

Mailing address, if different is:

1214 SE CHASE RD.PORT ST LUCIE, FL 34953**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: 1,000**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**Name and Title: TANIA MARIA MEYNARD/PRESIDENT

Name and Title: _____

Address

1214 SW CHASE RD.

Address: _____

PORT ST LUCIE, FL 34953

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

2021 MAR 17 AM 11:02
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CLERK OF COURT
PORT ST LUCIE, FL 34953

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Name and Title: _____ Name and Title: _____

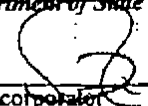
Address: _____ Address: _____

_____**ARTICLE VI REGISTERED AGENT**The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:Name: TAXPEOPLE LLCAddress: 2855 SW BRIGHTON ST
PORT ST LUCIE, FL 34953**ARTICLE VII INCORPORATOR**The name and address of the Incorporator is:Name: CLAUDIO TOLEDO RIBEIROAddress: 2855 SW BRIGHTON ST
PORT ST LUCIE, FL 34953**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 Agent03/17/2021
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/Incorporator03/17/2021
Date