

P21000094667

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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2021 NOV -5 11:2:52

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NOV 6 2021

COVER LETTER

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

SUBJECT: The Smoke Pit 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: Samerson Fead
Name (Printed or typed)

14972 W US RD
Address

Greenville Fla 32331
City, State & Zip

850 728-7200
Daytime Telephone number

S.Fead40@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: The smoke pit INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

14972 W US 90
Greenville FL 32331

SAME

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Food trailer

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jamerson Frad (P) Name and Title: _____

Address: 14972 W Address: _____

US 90 Greenville

FL 32331

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

2021 NOV - 5 PM 2:55

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: Samersan Fead

Address: 14972 W US 90

Greenville Fla 32331

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Samersan Fead

Address: 14972 W US 90

Greenville FL 32331

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

[Signature]
Required Signature/Registered Agent

11-5-21
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.

[Signature]
Required Signature/Incorporator

11-5-21
Date