

P21000102603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

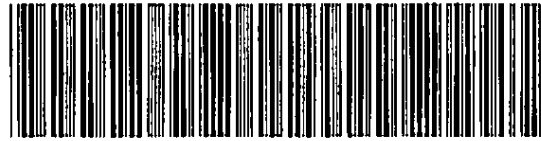
(Business Entity Name)

(Document Number)

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

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2021 DEC -7 AM 10:15

Handwritten signature

Handwritten mark

# KANG HAGGERTY

**Jacklyn Fetbroyt**

215.525.5854

jfetbroyt@kanghaggerty.com

November 29, 2021

*Via Priority Mail*

New Filing Section

Department of State

Division of Corporation

P.O. Box 6327

Tallahassee, FL 32314

**Re: S3 Tech Associates, Inc. – Articles of Incorporation**

2021 DEC -7 AM 12:16

RECEIVED

To Whom It May Concern:

Enclosed, please find for filing two copies of the Articles of Incorporation, in addition to a check payable to Florida Department of State for \$70.00. Kindly process the Articles of Incorporation and return to my attention.

Sincerely,

/s/ Jacklyn Fetbroyt

Jacklyn Fetbroyt

JF/tny

Enclosures

c.c. (via email w/o check)  
Client

**KANG HAGGERTY & FETBROYT LLC**

123 South Broad Street, Suite 1670, Philadelphia, PA 19109

T: 215.525.5850 F: 215.525.5860 kanghaggerty.com

## COVER LETTER

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

SUBJECT: S3 Tech Associates, 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: Jacklyn Fetbroyt, Esq.  
Name (Printed or typed)

123 S. Broad St., Suite 1670  
Address

Philadelphia, PA 19109  
City, State & Zip

215-525-5850  
Daytime Telephone number

jfetbroyt@kanghaggerty.com  
E-mail address: (to be used for future annual report notification)

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

2001 DEC -7 AM 10:16

FILED

**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: S3 Tech Associates, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

10330 Silverbrook Trl  
Jacksonville, FL 32256

Mailing address, if different is:

10330 Silverbrook Trl  
Jacksonville, FL 32256

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: Any and all lawful business, including IT development and consulting

**ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Padma Priya Kothapalli, President/Director

Name and Title: \_\_\_\_\_

Address 10330 Silverbrook Trl  
Jacksonville, FL 32256

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_ Name and Title: \_\_\_\_\_

Address \_\_\_\_\_ Address: \_\_\_\_\_

2011 DEC -7 AM 9:16

ED

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: Padma Priya Kothapalli  
Address: 10330 Silverbrook Trl  
Jacksonville, FL 32256

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Padma Priya Kothapalli  
Address: 10330 Silverbrook Trl  
Jacksonville, FL 32256

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2021 DEC -7 AM 10:16  
CLERK OF STATE

**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  
Date 11/22/2021

*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  
Date 11/22/2021