P21000104651

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone	#)
	MAIL
(Business Entity Nam	ne)
(Document Number)	
Certified Copies Certificates	of Status
Special Instructions to Filing Officer.	

Office Use Only



FILED 2021 DEC 17 PH 2: 42

SECRETARY OF STATE TALLAHASSEE, FL

 Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 12/17/2021

WALK IN

ENTITY NAME Planet Holdings Inc - Formation

1-2 filing. File Formation first.

DOCUMENT NUMBER_____

PLEASE FILE THE ATTACHED AND RETURN

XXXXXX

Plain Copy Certified Copy Certificate of Status

PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY

Certified Copy of Arts & Amendments Certificate of Good Standing

**APOSTILLE' / NOTARIAL CERTIFICATION **

TOTAL OWED^{\$70}

ACCOUNT #: I20160000072

-5, 8 FM

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

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

SUBJECT: <u>Planet Holdings, Inc.</u> (PROPOSED CORPORATE NAME - <u>MUST INCLUDE SUFFIX</u>)

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	□ \$87.50
Filing Fee	Filing Fee.
& Certified Copy	Certified Copy
-	& Certificate of
	Status
ADDITIONAL CO	PY REQUIRED

FROM: Adam J. Smith, Esq.

Name (Printed or typed)

2000 Glades Road, Suite 212

Address

Boca Raton, FL 33431

City, State & Zip

(561) 626-2101

Daytime Telephone number

asmith@comitersinger.com

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

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

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

<u>ARTICLE1 NAME</u> The name of the corporat	ion shall be: <u>Planet Holdings, Inc.</u>			
	Principal <u>street</u> address Street		Mailing address, if different is:	,
ARTICLE III PURPO The purpose for which the	DSE he corporation is organized is: <u>engaging</u>	<u>in any lawful b</u>	usiness.	-
ARTICLE IV SHARI			ZHIL DEC 17 PH	
	L OFFICERS AND/OR DIRECTORS		PH 2: 42	D
Name and Title Address	: Mehwish (May) Baqai, President 8755-8788 NW 15th Street Doral, FL 33172	_ Address:		
Name and Title: Address		_ Address:		
Name and Title: Address		_ Name and Title:		
	·	-		

Name and	d Title:	Name and Title	;
Address		Address:	
	·	-	
		-	
	<u>REGISTERED AGENT</u> orida street address (P.O. Box NOT acceptable) o	the registered age	ent is:
Name:	Mehwish (May) Baqai	-	
Address:	8755-8788 NW 15th Street		
	Doral, FL 33172	-	
<u>ARTICLE VII</u>	INCORPORATOR		
The <u>name and ad</u>	Idress of the Incorporator is:		
Name:	<u>Mehwish (May) Baqai</u>	-	
Address:	8755-8788 NW 15th Street	_	
	Doral, FL 33172	-	
Effective date, if	<u>EFFECTIVE DATE:</u> other than the date of filing: January 1, 2022 ate is listed, the date must be specific and canno	(O of be more than t	PTIONAL) five days prior or 90 days after the
	inserted in this block does not meet the applicable ffective date on the Department of State's records.		equirements, this date will not be listed as

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

· U.F. <	12/09/2021
Required Signature/Registered Agent	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.

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Required Signature/Incorporator

PORTOEC 17 PH 2:42 SECRETARY OF STATE

12/09/2021

Date