P2300001150

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special manual and to thing amount

Office Use Only



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2022 OCT 28 PM 3: 30

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W22-106563





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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 18, 2022

BRIAN C. GILBERT 2311 STATE RD. 524, STE. 112-321 COCOA, FL 32926

SUBJECT: POLARIS RESOURCES, INC.

Ref. Number: W22000106503

We have received your document for POLARIS RESOURCES, INC. and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the converting entity cannot be located in our records. Also, a DBA or sole proprietorship cannot be converted into a Corporation or Limited Liability Company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

DANIEL L O'KEEFE Regulatory Specialist II

Letter Number: 122A00018435

2022 OCT 28 PM 3: 30

www.sunbiz.org

COVER LETTER

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

SUBJECT: Po	olaris Resources, Inc.		
3000001	(PROPOSED CORPORA	TE NAME – <u>MUST INCI.</u>	UDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of the art	icles of incorporation and	l 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	
	Brian C. Gilbert Nam 2311 State Road, 524, Suite 112	e (Printed or typed)	
_		Address	
	Cocoa, Florida 32926		
_	City	, State & Zip	
	321-217-4133		
_	Daytime ?	Telephone number	
	brian.c.gilbert.fl@gmail.com		
	E-mail address: (to be use	d for future annual report i	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)

RTICLE I NAME			
he name of the corpora	tion shall be:		
ARTICLE II PRINCIPAL OFFICE Principal street address 2311 State Road 524, Suite 112-321		:	Mailing address, if different is:
Cocoa, Florida 32926	une 112-521		
			=
ARTICLE III PURP	OSE		
he purpose for which	the corporation is organized is: Business	Management	
			
			022 C
			OCT PARTY
_	 		- - 62 P
			<u> </u>
			PH 3: 30
ARTICLE IV SHAR	ES		်ာ္သႏု ယ္
The number of shares of	stock is: 100,000 no par value		3: 30
			,
ARTICLE V INITIA	AL OFFICERS AND/OR DIRECTORS		
			Arabella Gilbert, Board Member
Name and Titl	e: Brian C. Gilbert, CEO/Chairman	Name and Title:	Arabella Gilbert, Board Member
Address	1910 Oak Grove Chase Drive	Address:	1910 Oak Grove Chase Drive
	Orlando, Florida 32820		Orlando, Florida 32820
	Offando, Fforida (92840)		Orlando, Fronta 32820
Name and Title	Autumn G. Gilbert, COO/President	Name and Title:	Carter Garmon, Board Member
Address	1910 Oak Grove Chase Drive	Address:	1910 Oak Grove Chase Drive
	Orlando, Florida 32820		Orlando, Florida 32820
			-
Name and Title	Ava Garmon, Secretary	Name and Title:	·
	1910 Oak Grove Chase Drive		
Address		Address:	
	Orlando, Florida 32820		

Name an	d Title:	Name and Title:	_
Address		Address:	<u>-</u>
	REGISTERED AGENT lorida street address (P.O. Box NOT acceptable) of the registered agent is:	_
Name:	Brian C. Gilbert	_	
Address:	2311 State Road 524, Suite 112-321 Cocoa, Florida 32926		
	INCORPORATOR Idress of the Incorporator is: Brian C. Gilbert	2022 OCT 28	
Address:	2311 State Road 524, Suite 112-321	— — — — — — — — — — — — — — — — — — —	T
	Cocoa, Florida 32926	000 30 30 30 30 30 30 30 30 30 30 30 30	
Effective date, if (If an effective d filing.) Note: If the date		nnot be more than five days prior or 90 days after the ble statutory filing requirements, this date will not be listed	as
'	ned as registered agent to accept service of proces familiar with and accept the appointment as regi.	ss for the above stated corporation at the place designated in stered agent and agree to act in this capacity 08/18/2022	this
	Required Signature/Registered Agent		
I submit this doc	rument and affirm that the facts stated herein o	are true. I am aware that the false information submitted i	in a
	Department of State constitutes a third degree fe		
Required Signatu	re/Incorporator	Date	_