

P11000069210

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

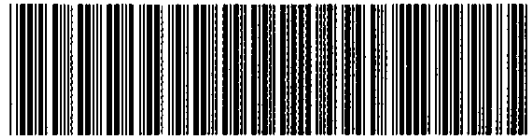
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

MRP
8/2

COVER LETTER

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

SUBJECT: Nicole Paloma 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: Nicole Rockhill

Name (Printed or typed)

111 Crescent Road

Address

Santa Rosa Beach, FL 32459

City, State & Zip

205-283-6997

Daytime Telephone number

sthornton821@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

Nicole Paloma Inc

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address

111 Crescent Road
Santa Rosa Beach, FL 32459

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
Manufacture clothing for wholesale and retail sales

ARTICLE IV SHARES 100

The number of shares of stock is:

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Nicole Rockhill, Owner

Address: 111 Crescent Road
Santa Rosa Beach, FL 32459

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

Name and Title: _____

Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: Nicole Rockhill

Address: 111 Crescent Road
Santa Rosa Beach, FL 32459

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Susan Thornton

Address: P.O. Box 4685
Santa Rosa Beach, FL 32459

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

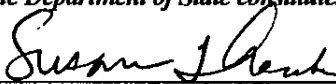


Required Signature/Registered Agent

7/27/11

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/Incorporator

7/27/11

Date

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