

N07000007995

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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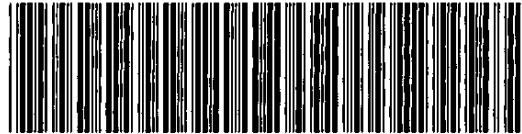
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Fred's Speakeasy Inc.
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is 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

ADDITIONAL COPY REQUIRED

FROM: Lynne Demarest
Name (Printed or typed)

229 Lexington Dr
Address

Daytona Beach, FL 32114
City, State & Zip

386-235-3110
Daytime Telephone number

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

ARTICLES OF INCORPORATION
In Compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I NAME

The name of the corporation shall be:

Fred's Speakeasy *Inc.*

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

229 Lexington Dr
Daytona Beach, FL 32114

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Non-profit Coffee House

ARTICLE IV MANNER OF ELECTION

The manner in which the directors are elected or appointed:

By President

ARTICLE V INITIAL DIRECTORS AND/OR OFFICERS

List name(s), address(es) and specific title(s):

Lynne Demarest
P.O. Box 265785
Daytona Beach, FL 32126
President

ARTICLE VI INITIAL REGISTERED AGENT AND STREET ADDRESS

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

Lynne Demarest
229 Lexington Dr
Daytona Beach, FL 32114

LYNNE DEMAREST
lynne demarest
LYNNE DEMAREST

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LYNNE DEMAREST
229 LEXINGTON DR
DAYTONA BEACH, FL 32114

lynne demarest
LYNNE DEMAREST

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.

lynne demarest

Signature/Registered Agent

8/6/07

Date

lynne demarest

Signature/Incorporator

8/6/07

Date

FILED
07 AUG 13 AM 9:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA