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SECRETARY OF STATE VISION OF CORPORATIONS

PS 2/7/13

COVER LETTER

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

SUBJECT: ABCBOKYChildrening
(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 &

Filing Fee & Certificate of

Status

□\$78.75

Filing Fee

\$87.50

& Certified Copy

Filing Fee, Certified Copy

& Certificate

ADDITIONAL COPY REQUIRED

FROM: Brenda M. Spalding
Name (Printed or typed)

6109 55Th Terrace EasT

Bradenton FL 34403
City, State & Zip

H-941-739-0496 W-941-365-2303

Daytime Telephone number

brenda gnalding@phababooks4ahildren. Lom E-mail address: (to be used for future amhual report notification)

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

ARTICLES OF INCORPORATION

In compliance with Chapter 617, F.S., (Not for Profit)

·	in co	impliance with Chapter 617, F.S., (Not, for Prof	Ell En
ARTICLE I The name of the	NAME corporation shall be: ABI	CBooks 4Children	SECRETARY OF STATE DIVISION OF CORPORATION
ARTICLE II	PRINCIPAL OFFICE		13 FEB -6 AM 9: 41
•	Principal street address:	Mailing a	address, if different is:
6/0	99 SSTH Terra	LCE EAST	
Bri	adenton, FL	34208	
ARTICLE III			4
The purpose for	which the corporation is organ	nized is: Our MISSIAN	isto form
a sel	working al	liance of self-pu	whishing,
self.	narketing	and aspiring au	thors and
illusts	story in to	he field of childre	ess bodes
tout	parial & Me	weelge, share a	Chirieseen
		regard promote	
(DAJON)	or mount	significant prometic	Decentery.

ARTICLE IV		The manner in which the directors are ele	ected and appointed:
MANNIN	ration as	a paper ballet	
ARTICLE V	INITIAL OFFICERS A	AND/OR DIRECTORS	
<u> </u>	21121125 01110310 1	MAD ON BILLIOTONS	
Name and Title:	Brenda Systole	Name and Title:	
	Arexident	Address:	
	109 Exthe tes	10415	
4	Bradenton,	ti adaga	
	,	•	
Name and Title:		Name and Title:	
Address _		Address:	
_			
Name and Title:		Name and Title:	
			•
Address _		Address:	
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Name and Title:	Na	ame and Title:
Address _	A	ddress:
-		
Name and Title:	N ₁	ame and Title:
Address _	Ac	ldress:
_		· · · · · · · · · · · · · · · · · · ·
_		
ARTICLE VI The name and F	REGISTERED AGENT lorida street address (P.O. Box NOT acceptab	le) of the registered agent is:
Name:	Brenda M. Spald	
Address:	6109 55TH Terrac	E East
	Bradenton, F1 348	003
ARTICLE VII	INCORPORATOR Idress of the Incorporator is:	
	. prof	م ساء
Name:	Brenda M. Spald	ING
Address:	6109 56TH Terrac	
	Bradenton, Fl 34	1203
		process for the above stated corporation at the place designated in this gistered agent and agree to act in this capacity
Brend	Required Signature of Registered Age	Feb 4, 2018 Date
to the Departmen	t of State constitutes a third degree felony as p	-
Brens	Required Signature of Incorpora	Tel 4, 2013