

P02000134138

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

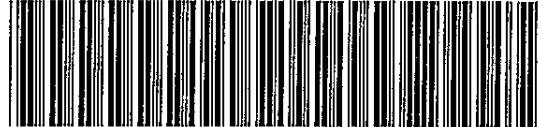
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000009572090

12/20/02--01019--016 **87.50

FILED
02 DEC 20 AM 9:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TRANSMITTAL LETTER

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

SUBJECT: SPA GENEVIEVE, 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 ☐ \$78.75
Filing Fee Filing Fee
 & Certificate of Status

☐ \$78.75 ☒ \$87.50
Filing Fee Filing Fee,
& Certified Copy Certified Copy
 & Certificate of
 Status

ADDITIONAL COPY REQUIRED

FROM: JEN WENGER
Name (Printed or typed)

1997 LEXINGTON PLACE
Address

TARPON SPRINGS FL 34688
City, State & Zip

727. 939. 1891
Daytime Telephone number

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

The name of the corporation shall be:

spa genevieve, inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1997 Lexington Place
Tarpon Springs FL 34688

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

facials, tanning

ARTICLE IV SHARES

The number of shares of stock is:

100

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

JEN WENGER -- PRES.
1997 Lexington Place
Tarpon Springs, FL 34688

Stacey Wenger -- VP
same address

ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Stacey Wenger
1997 Lexington Pl.
Tarpon Springs, FL 34688

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JEN WENGER
1997 Lexington Place
Tarpon Springs, FL 34688

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



Signature/Registered Agent

12.17.02

Date



Signature/Incorporator

12.17.02

Date

02 DEC 20 AM 9:54
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED