

P03000065383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

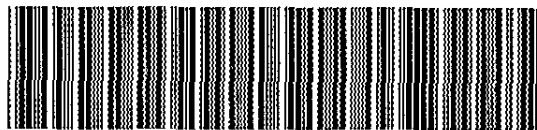
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

KL

TRANSMITTAL LETTER

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

SUBJECT: GET-EM-A-GIFT.COM, 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: BONNIE LYNN JUDY
Name (Printed or typed)

11260 NW 39TH STREET
Address

CORAL SPRINGS, FL 33065
City, State & Zip

954-649-7701
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:

GET-EM-A-GIFT.COM, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

11260 NW 39TH STREET
CORAL SPRINGS, FL 33065

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:
DISTRIBUTOR

ARTICLE IV SHARES

The number of shares of stock is:

1,000 SHARES @1.00 PAR VALUE

ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

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

BONNIE LYNN JUDY - PRESIDENT
GLEN DALE JUDY II - VICE PRESIDENT
11260 NE 39TH STREET
CORAL SPRINGS, FL 33065

ARTICLE VI REGISTERED AGENT

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


BONNIE LYNN JUDY
11260 NW 39TH STREET
CORAL SPRINGS, FL 33065

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

BONNIE LYNN JUDY
11260 NW 39TH STREET
CORAL SPRINGS, FL 33065

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



Date



Signature/Incorporator



Date

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TALLAHASSEE, FLORIDA