

P04000020625

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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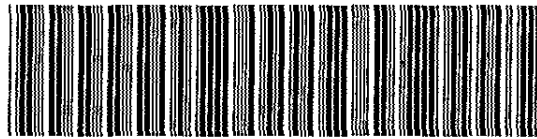
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 JAN 22 AM 11:48

FILED

(Qm) 2-2-04

TRANSMITTAL LETTER

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

SUBJECT: BOB'SHOP, 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: ROBERT HOFFMAN //
 Name (Printed or typed)

2041 B RANGE ROAD
 Address

CLEARWATER, FL. 33756
 City, State & Zip

727-466-0059
 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: BOB'S SHOP INC.

04 JAN 22 AM 11:48

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

2041 B RANGE ROAD

CLEARWATER, FL. 33756

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

MY PLANS ARE TO EXPAND MY BUSINESS
IN THE NEAR FUTURE AND MY LAWYER RECOMMENDED THAT I INCORPORATE PRIOR
TO DOING SO.

ARTICLE IV SHARES

The number of shares of stock is: 500 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): ROBERT HOFFMAN II PRESIDENT/OWNER

2041 B RANGE ROAD CLEARWATER FL. 33756

ARTICLE VI REGISTERED AGENT

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

ROBERT HOFFMAN II
2041 B RANGE ROAD
CLEARWATER, FL. 33756

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ROBERT HOFFMAN II
2041 B RANGE ROAD
CLEARWATER, FL. 33756

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

Robert E. Hoffmann II
Signature/Registered Agent

1-8-04
Date

Robert E. Hoffmann II
Signature/Incorporator

1-8-04
Date