

P04000107118

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

7-20-04

## TRANSMITTAL LETTER

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

**SUBJECT:** FABULOUS FAUX, 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  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

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

**ADDITIONAL COPY REQUIRED**

**FROM:** FABULOUS FAUX, INC.

Name (Printed or typed)

478 N. TURKEY PINE LOOP

Address

LECANTO, FL 34461

City, State & Zip

352/746-5512

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:

FABULOUS FAUX, INC.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

478 N. TURKEY PINE LOOP, LECANTO, FL 34461

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFULL BUSINESS IN FLORIDA

### ARTICLE IV SHARES

The number of shares of stock is:

1,000

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

CYNTHIA L LARSEN - PRESIDENT/V-PRESIDENT/SECRETARY/TREASURER  
478 N. TURKEY PINE LOOP  
LECANTO, FL 34461

### ARTICLE VI REGISTERED AGENT

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

CYNTHIA L. LARSEN, 478 N. TURKEY PINE LOOP, LECANTO, FL 34461

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

CYNTHIA L. LARSEN, 478 N. TURKEY PINE LOOP, LECANTO, FL 34461

\*\*\*\*\*  
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

Cynthia L. Larsen  
Signature/Registered Agent

7/16/04  
Date

Cynthia L. Larsen  
Signature/Incorporator

7/16/04  
Date