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TRANSMITTAL LETTER

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

SUBJECT: FAT CAT Ribs, 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: PRESTON TIMMONS
Name (Printed or typed)

830 38TH AVE. S.
Address

ST. PETERSBURG, FL 33705
City, State & Zip

727/688-6062
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:

FAT CAT Ribs, Inc

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

2401 CENTRAL AVE
ST. PETERSBURG, FL

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SERVICE BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: TWO

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

PRESTON TIMMONS CO-OWNER
820 38TH AVE. S.
ST. PETERSBURG, FL 33705

ADA WARD-TIMMONS
820 38TH AVE. S.
ST. PETERSBURG, FL 33705

ARTICLE VI REGISTERED AGENT

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

ADA WARD-TIMMONS
2401 CENTRAL AVE
ST. PETERSBURG, FL

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

PRESTON TIMMONS
2401 CENTRAL AVE
ST. PETERSBURG, FL

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

2/24/05
Date



Signature/Incorporator

2/24/05
Date