

P05000097623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

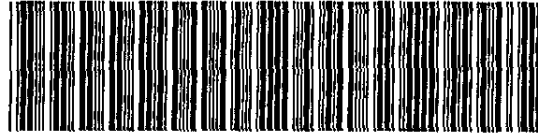
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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07/11/05--01023--021 \*\*78.75

05 JUL 11 AM 9:44

J. Shivers JUL 13 2005

## TRANSMITTAL LETTER

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

**SUBJECT:** Patricia Denise, 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:** Patricia Denise Yost

Name (Printed or typed)

631 Kings Lane SW

Address

Winter Haven, FL 33880

City, State & Zip

863-291-3599

Daytime Telephone number

05 JUN 11 AM 9:22  
JUN 11 2011  
JUN 11 2011

**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:

Patricia Denise, Inc

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

631 Kings Lane SW  
Winter Haven, FL 33880

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

This is a service S- Corporation. I will be hired by a company, as an independent, to answer their call center customer service calls.

### ARTICLE IV SHARES

The number of shares of stock is:

100

### ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Patricia Yost/ President  
Jeremy Yost/ Vice President  
Patricia Yost/ Treasurer  
Jeremy Yost/ Secretary

### ARTICLE VI REGISTERED AGENT

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

Patricia Yost  
631 Kings Lane SW  
Winter Haven, FL 33880

### ARTICLE VII INCORPORATOR

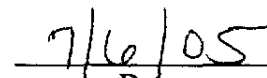
The name and address of the Incorporator is:


Patricia Yost  
631 Kings Lane SW  
Winter Haven, FL 33880


\*\*\*\*\*

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

05 JUL 11 AM 9:23  
RECEIVED  
CLERK OF COURT  
JUL 11 2005