## 00008972

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## **COVER LETTER**

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

SUBJECT: A Fire place Shap (PROPOSED CORPORA)	Inc	
(PROPOSED CORPORA)	TE NAME – <u>MUST INCL</u>	UDE SUFFIX)
		1 1 2 2 6
Enclosed are an original and one (1) copy of the artic	cles of incorporation and	i a check for:
\$70.00 \$78.75 Filing Fee Filing Fee	\$78.75 Filing Fee	☐ \$87.50 Filing Fee,
& Certificate of Status	& Certified Copy	Certified Copy & Certificate of
	ADDITIONAL CO	Status DPY REQUIRED
FROM: Mary Perricone	(Printed or typed)	•
917 Dogwood	Road	
North Palm B	each, FL 3	334
561. 626.988 Daytime T	elephone 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)	FILED
ARTICLE I NAME	. 06 JAN 17 AM II: 10
The name of the corporation shall be: A Five place Shop,	
ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is: 10475 Rivers  Polyn Beach	ide DR Swith Gadens, 76 33410
ARTICLE III PURPOSE  The purpose for which the corporation is organized is: Furnish and accessorie for five places, wood, and mantels repair part, and logs and all in with five places. Ventury, calers had a ARTICLE IV SHARES  The number of shares of stock is:	
ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS List name(s), address(es) and specific title(s):  Mary Perricane, Director  917 Dogwood Rood  North Falm Beach, 7L 33408  ARTICLE VI REGISTERED AGENT  The name and Florida street address (P.O. Box NOT acceptable) of the r  10475 River Side DR S+6  Palm Beach Gardens, FL 3341	registered agent is:  Mary Perricans
ARTICLE VII INCORPORATOR  The name and address of the Incorporator is:  Mary Ferricane  917 Dogwood Dood  North Falm Beach, 74, 33408	********
Having been named as registered agent to accept service of process for the above states certificate, I am familiar with and accept the appointment as registered agent and agree of Signature/Registered Agent  Signature/Incorporator	