

POL 0000 11307

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

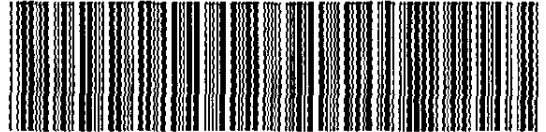
(Document Number)

Certified Copies _____

Certificates of Status _____

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06 JAN 20 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/26/06
502

COVER LETTER

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

SUBJECT: HOP 'TIL YOU 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
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:

Lis A. CLARK

Name (Printed or typed)

55012 BARBADOS BAY

Address

BOYNTON BEACH, FLORIDA 33436

City, State & Zip

561-734-4949

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:

HOP 'TIL YOU SHOP, INC

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

55012 BARBADOS BAY
BOYNTON BEACH, FL 33436

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

INTERNET SALES

ARTICLE IV SHARES

The number of shares of stock is:

1,000,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

LIS A. CLARK, ALL OFFICES,
55012 BARBADOS BAY, BOYNTON BEACH, FL 33436

ARTICLE VI REGISTERED AGENT

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

LIS A. CLARK
55012 BARBADOS BAY
BOYNTON BEACH, FL 33436

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

LIS A. CLARK
55012 BARBADOS BAY
BOYNTON BEACH, FL 33436

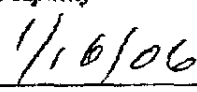
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



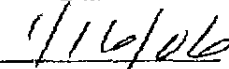
Signature/Registered Agent



Signature/Incorporator



Date



Date

FILED
JAN 20 PM 12:08
06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Signature/Registered Agent



Signature/Incorporator

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TALLAHASSEE, FLORIDA


Date


Date