

P06000031220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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W6-8060

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06 MAR -2 AM 8:58  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

T. Burch, Clerk 3 2006

## COVER LETTER

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

SUBJECT: Colors By Shawn

(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: Shawn Scholl

Name (Printed or typed)

2113 S.E. Trillo Street

Address

Port Saint Lucie, FL 34952

City, State & Zip

772-486-8657

Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 20, 2006

SHAWN SCHOLL  
2113 S.E. TRILLO STREET  
PORT SAINT LUCIE, FL 34952

SUBJECT: COLORS BY SHAWN  
Ref. Number: W06000008360

We have received your document for COLORS BY SHAWN and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch  
Document Specialist  
New Filing Section

Letter Number: 406A00011889

**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:

Colors By Shawn, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

2113 S.E. Trillo Street, Port Saint Lucie, FL 34952

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all lawful Business.

**ARTICLE IV SHARES**

The number of shares of stock is:

1000

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

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

Shawn Scholl, 2113 S.E. Trillo Street, Port Saint Lucie, FL 34952, President

**ARTICLE VI REGISTERED AGENT**

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

Shawn Scholl, 2113 S.E. Trillo Street, Port Saint Lucie, FL 34952

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Shawn Scholl, 2113 S.E. Trillo Street, Port Saint Lucie, FL 34952

FILED  
06 MAR -2 AM 8:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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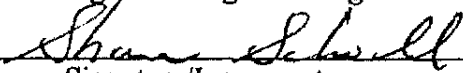
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*



Signature/Registered Agent

2-13-06

Date



Signature/Incorporator

2-13-06

Date