

P0600007SS14

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

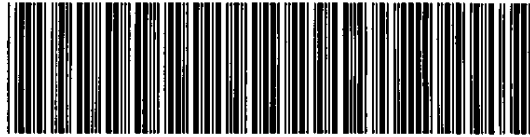
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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FILED
06 JUN - 1 PM 3:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
06 JUN - 1 PM 3:21
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: Bishop's Southern Soul Food Buffet
(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: Norolinda K. Jones
Name (Printed or typed)

2412 Pontiac Dr.
Address

Tallahassee, FL 32301
City, State & Zip

850-284-4169, 850-277-6500
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:

Bishop's Southern Soul Food Buffet Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

8901 Woodville Hwy, Tall, FL 32308

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:

1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Keith Johnson, Owner 2121 La Rochelle Dr.
Tall, FL 32308
Karolina Jones, co-owner 2412 Pontiac Dr.
Tall, FL 32301

ARTICLE VI REGISTERED AGENT

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

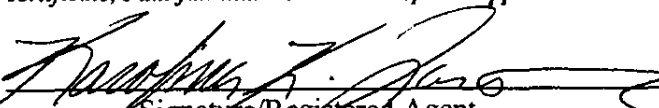
Karolina K. Jones
2412 Pontiac Dr.
Tall, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Keith Johnson
2121 La Rochelle Dr.
Tall, FL 32308

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

6-1-04
Date


Signature/Incorporator

6-1-04
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA