

PO6000105699

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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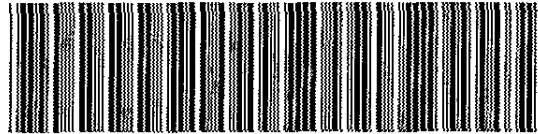
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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COVER LETTER

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

SUBJECT: Jackalope Design, Co.

(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: Kerstin Nelsen Strom

Name (Printed or typed)

1519 Johnson Street

Address

Hollywood, FL 33020

City, State & Zip

216-235-4033

Daytime Telephone number

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 7, 2006

KERSTIN NELSEN STROM
1519 JOHNSON STREET
HOLLYWOOD, FL 33020

SUBJECT: JACKALOPE DESIGN, CO.
Ref. Number: W06000027782

We have received your document for JACKALOPE DESIGN, CO. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The registered agent must sign accepting the designation.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return 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 850-245-6052.

Paisley A Alford
New Filing Section
Division of Corporations

Letter Number: 506A00041170

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:

Jackalope Design, Co.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

1519 Johnson Street
Hollywood, FL 33020

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Design Service

ARTICLE IV SHARES

The number of shares of stock is:

50

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Kerstin Nelsen Strom, 1519 Johnson Street Hollywood, FL 33020, Owner

ARTICLE VI REGISTERED AGENT

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

Kerstin Nelsen Strom
1519 Johnson Street
Hollywood, FL 33020

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Kerstin Nelsen Strom
1519 Johnson Street
Hollywood, FL 33020

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

8.10.6

Date



Signature/Incorporator

8/10/6

Date

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 AUG 14 AM 9:26

FILED