

PO6000141208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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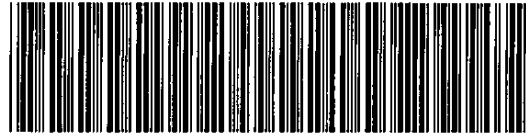
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C/S 11-8

COVER LETTER

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

SUBJECT: NATURE COAST REFERRALS, 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: ANGELA GEOFFRION
Name (Printed or typed)

3663 COMMERCIAL WAY
Address

SPRING HILL, FL 34606
City, State & Zip

352-279-3364
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: NATURE COAST REFERRALS, INC.

ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is: 3663 COMMERCIAL WAY
SPRING HILL, FL 34606

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: BUSINESS REFERRALS

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

ANGELA GEOFFRION
PRESIDENT
7428 FLYWAY DR
SPRING HILL, FL 34607

JENETTE MANZOW
VICE PRESIDENT
13015 SEYBOLD DR.
SPRING HILL, FL
34608

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ARTICLE VI REGISTERED AGENT

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

ANGELA GEOFFRION
7428 FLYWAY DR
SPRING HILL, FL 34607

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

ANGELA GEOFFRION
7428 FLYWAY DR.
SPRING HILL, FL 34607

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

Angela Geoffrion
Signature/Registered Agent

11-3-06
Date

Angela Geoffrion
Signature/Incorporator

11-3-06
Date