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TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS  
STATE

FILED  
07 JAN -3 PM 12:52  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

## COVER LETTER

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

SUBJECT: Two-Nichols-Family Restaurant 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: Debra Reams VaillanCourt  
Name (Printed or typed)

30 chickat-trail  
Address

Crawfordville Fla 32327  
City, State & Zip

850-544-6977 850 905-4850  
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:

Two-nichols Family Restaurant, Inc.

**ARTICLE II PRINCIPAL OFFICE**

The principal place of business/mailling address is:

P.O. Box 37 ST Marks FL 32355  
785 port Leon Dr. ST Marks FL 32355

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

Any and all Lawfull Business

**ARTICLE IV SHARES**

The number of shares of stock is:

1 ~~1000~~

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

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

Debra R. VaillanCourt  
Lee Stoddard  
Nancy Nichols

**ARTICLE VI REGISTERED AGENT**

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

Debra R. VaillanCourt  
30 chickat trail Crawfordville FL 32327

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Debra R. VaillanCourt  
30 chickat trail Crawfordville FL 32327

\*\*\*\*\*  
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

Debra R. VaillanCourt  
Signature/Registered Agent

1-3-07  
Date

Debra R. VaillanCourt  
Signature/Incorporator

1-3-07  
Date

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA