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(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





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# **COVER LETTER**

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

SUBJECT: Coo	kies and Cream Inc.		
	(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	UDE SUFFIX)
Enclosed are an or	iginal and one (1) copy of the arti	cles of incorporation and	d a check for:
S70.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	\$87.50 Filing Fee, Certified Copy & Certificate o Status  PY REQUIRED
FROM:	Shawn L. Yokes		
-	Name	(Printed or typed)	
	1532 Sherbrook Dr.		
	•	Address	
	Clermont, FL 34711		
	City,	State & Zip	
	352-243-8676		
	Daytime T	elephone 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:

Cookies and Cream Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailing address is:

1532 Sherbrook Dr. Clermont, FL 34711

### ARTICLE III **PURPOSE**

The purpose for which the corporation is organized is:

The purpose for which the corporation is organized is:

To engage in any lawful act or activity for which a corporation may be organized under the general corporation law of Florida. Operation of a dessert shop and related activities.

### SHARES ARTICLE IV

The number of shares of stock is:

50,000

# INITIAL OFFICERS AND/OR DIRECTORS

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

Shawn L. Yokes 1532 Sherbrook Dr. Clermont, FL 34711 (President)

Cammie J. Yokes 1532 Sherbrook Dr. Clermont, FL 34711 (Secretary and Treasurer)

### ARTICLE VI REGISTERED AGENT

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

Shawn L. Yokes 1532 Sherbrook Dr. Clermont, FL 34711

### ARTICLE VII **INCORPORATOR**

The name and address of the Incorporator is:

Shawn L. Yokes 1532 Sherbrook Dr. Clermont, FL 34711

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 SHAWN L. YOKES 1-22-07

SHAWN L. YOKES 1-22-07 Signature/Registered Agent

Signature/Incorporator