

PD8000065537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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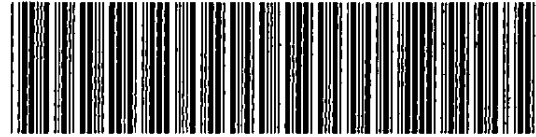
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: MY DESIGNER'S ATTIC, 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: JAMES R. HOLSTROM
Name (Printed or typed)

16211 SE 36TH AVE
Address

SUMMERFIELD, FL 34491
City, State & Zip

954-675-3163
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: MY DESIGNER'S ATTIC, INC.

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is:

16211 S.E. 36TH Ave., Summerfield, FL 34491

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

SALE OF USED FURNITURE

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):

President JAMES R. HOLSTROM, 16211 SE 36TH AVE, Summerfield, FL 34491
Vice President WALTER A. MACKELBURG 10074 Bernington Chase DR. ORLANDO, FL 32829
Director JUAN B. LEOGARD 13818 SE 93RD CIR, Summerfield, FL 34491

ARTICLE VI REGISTERED AGENT

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

JAMES R. HOLSTROM
16211 S.E. 36TH, Summerfield, FL 34491

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

JAMES R. HOLSTROM
16211 S.E. 36TH AVE., Summerfield, FL 34491

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


Signature/Incorporator

7-5-08

Date
7-5-08

Date

FILED
08 JUL 10 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA