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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers NOV 30 2009

COVER LETTER

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

SUBJECT: MICHELLE FRAPPIER, INC.
(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input type="checkbox"/> \$70.00	<input type="checkbox"/> \$78.75
Filing Fee	Filing Fee & Certificate of Status

<input type="checkbox"/> \$78.75	<input checked="" type="checkbox"/> \$87.50
Filing Fee	Filing Fee,
& Certified Copy	Certified Copy
	& Certificate of
	Status

ADDITIONAL COPY REQUIRED

FROM: _____ MICHELLE FRAPPIER
Name (Printed or typed)

3 LEEWARD CIRCLE
Address

TEQUESTA, FL 33469
City, State & Zip

802.355.1225
Daytime Telephone number

E-mail address: (to be used for future annual report notification)

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

SECRETARY OF STATE,
TALLAHASSEE, FLORIDA

2009 NOV 25 PM 3:45

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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:

MICHELLE FRAPPIER, INC.

ARTICLE II PRINCIPAL OFFICE

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

3 LEEWARD CIRCLE, TEQUESTA, FL 33469

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

THE CORPORATION SHALL ENGAGE IN ANY ACTIVITY OR BUSINESS PERMITTED UNDER THE LAWS OF THE UNITED STATES AND THE STATE OF FLORIDA.

ARTICLE IV SHARES

The number of shares of stock is:

1000 SHARES

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

MICHELLE FRAPPIER

3 LEEWARD CIRCLE, TEQUESTA, FL 33469-PRESIDENT

ARTICLE VI REGISTERED AGENT

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

MICHELLE FRAPPIER

3 LEEWARD CIRCLE, TEQUESTA, FL 33469

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

MICHELLE FRAPPIER

3 LEEWARD CIRCLE, TEQUESTA, FL 33469

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

Date

Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

11-16-09

11-16-09