PARRION856

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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DEPARTMENT OF SPERGENIAN

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1-6-10 1-6-11-00

COVER LETTER

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

SUBJECT:		INC of TAMA	
Enclosed are an orig \$70.00 Filing Fee	inal and one (1) copy of the arm \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	a check for: \$87.50 Filing Fee, Certified Copy
	or or summer	ADDITIONAL CO	& Certificate of Status

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: Four S, Inc. of TAWAHASSET

ARTICLE II PRINCIPAL OFFICE

The principal street address and mailing address, if different is: 3609 Uncle Glover Rd Tallahassee, FL 32312

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: **Operate Restaurants**

ARTICLE IV SHARES

The number of shares of stock is: 100,000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

List name(s), address(es) and specific title(s): Lee Snowden 3609 Uncle Glover Rd Tallahassee, FL 32312 President

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is: Lee Snowden 3609 Uncle Glover Rd Tallahassee, FL 32312

10 JAN - 6 PH 1:57
ALLAHASSEE PLORIDA

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is: Lee Snowden 3609 Uncle Glover Rd Tallahassee, FL 32312

*********	*************
0	to accept service of process for the above stated
corporation at the place designated in the appointment as registered agent and agre	his certificate, I am familiar with and accept the e to act in this capacity
Ku Snuch	Julia
Signature/Registered Agent	Dota Dota