

P10000007238

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

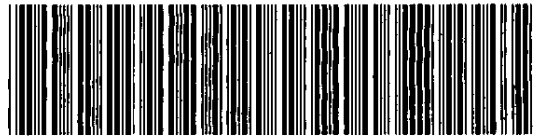
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/25/10--01022--021 **78.75

APPROVED
AND
FILED
10 JAN 25 PM 4:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

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

SUBJECT: A & D CONCESSIONS + CONSULTING 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: Melissa Spies
Name (Printed or typed)

2565 Dobbs Rd
Address

Saint Augustine, FL 32086
City, State & Zip

904-377-7794
Daytime Telephone number

melspies@gmail.com
Email address: (to be used for future annual report notification)

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)

APPROVED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

A + D CONCESSIONS + CONSULTING INC

10 JAN 25 PM 4: 06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE II PRINCIPAL OFFICE

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

2565 Dobbs Rd
SAINT AUGUSTINE, FL 32086

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

CONCESSIONS + CONSULTING

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

Melissa Spies
2565 Dobbs Rd
ST. AUGUSTINE, FL 32086

ARTICLE VI REGISTERED AGENT

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

Anne Cooper
4005 CASA GRANDE CT
ST. AUGUSTINE, FL 32033

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Melissa Spies
2565 Dobbs Rd

ST. AUGUSTINE, FL 32086

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

* Anne Cooper

Signature/Registered Agent

* Melissa Spies

Signature/Incorporator

1/22/10

Date

1/22/10

Date