

P10000048147

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

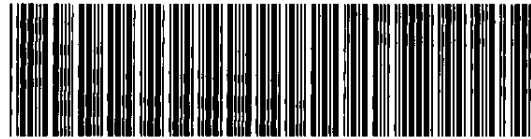
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/07/10--01039--014 **78.75

MRS
6/8

FILED
10 JUN - 7 PM 3:46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

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

SUBJECT: 2 Chix and a Map 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: Margie Williamson
Name (Printed or typed)

11005 McMullen Loop
Address

RiverView, Florida 33569
City, State & Zip

813-300-4941
Daytime Telephone number

MWilliamson834@gmail.com
E-mail 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)

FILED

10 JUN -7 PH 3:46

SECRETARY OF STATE
TALLAHASSEE FLORIDA

ARTICLE I NAME

The name of the corporation shall be:

2 Chix and a mop inc.

ARTICLE II PRINCIPAL OFFICE

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

11005 McMullen Loop
Riverview, Florida 33569

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

engaging in any activities 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:

100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

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

Margie Williamson
11005 McMullen Loop
Riverview, Florida 33569

owner/operator

ARTICLE VI REGISTERED AGENT

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

Margie Williamson
11005 McMullen Loop
Riverview, Fl. 33569

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Margie Williamson
11005 McMullen Loop
Riverview, Florida 33569

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

Margie Williamson

Signature/Registered Agent

6-3-10

Date

Margie Williamson

Signature/Incorporator

6-3-10

Date