

P10000102648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

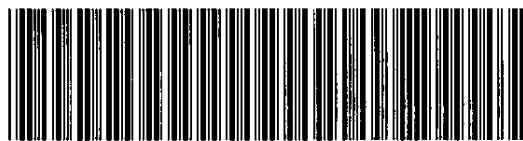
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2010 DEC 21 PM 12:35  
SEC. OF TREAS.  
TOLSON/DOSE

DEC 23 2010  
J. Silvers

## COVER LETTER

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

SUBJECT: Anastasia's Bookkeeping, 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: Anastasia Melnikova

Name (Printed or typed)

9987 Dovetail Dr. E

Address

Jacksonville, FL 32257

City, State & Zip

904-955-2227

Daytime Telephone number

asya98557@yahoo.com

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

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

2010 DEC 21 PM 12:35

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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:

Anastasia's Bookkeeping, Inc.

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

9987 Dovetail Dr. E

Jacksonville, FL 32257

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:

To provide bookkeeping and administrative services  
for the purpose of achieving a profit.

**ARTICLE IV SHARES**

The number of shares of stock is: One hundred shares at no par value

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Anastasia Melnikova, CEO

Address: 9987 Dovetail Dr. E

Jacksonville, FL 32257

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Address: \_\_\_\_\_

**ARTICLE VI REGISTERED AGENT**

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

Name: Anastasia Melnikova

Address: 9987 Dovetail Dr. E

Jacksonville, FL 32257

**ARTICLE VII INCORPORATOR**

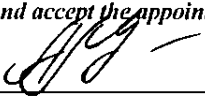
The name and address of the Incorporator is:

Name: Anastasia Melnikova

Address: 9987 Dovetail Dr. E

Jacksonville, FL 32257

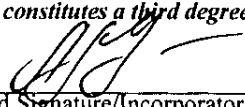
*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

  
Required Signature/Registered Agent

12/17/2010

Date

*I submit this document and affirm that the facts stated herein are true. I am aware that the false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.*

  
Required Signature/Incorporator

12/17/10

Date

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CLERK OF THE COURT  
JACKSONVILLE, FLORIDA