

P11000000864

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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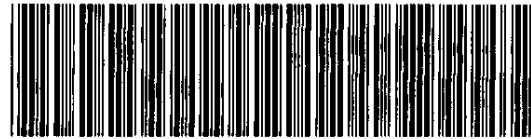
(Business Entity Name)

(Document Number)

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

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2011 JAN -4 PM 2:15  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. Shivers JAN 05 2011

## COVER LETTER

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

SUBJECT: Quilibet 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: Stacey Stiles

Name (Printed or typed)

3205 NW 83rd St. Apt. 634

Address

Gainesville, FL 32606

City, State & Zip

843-276-3586

Daytime Telephone number

staceyjreynolds@yahoo.com

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

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

OFFICE OF THE  
CLERK OF THE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF INCORPORATION**  
In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

**ARTICLE I NAME** Quilibet Inc.  
The name of the corporation shall be:

**ARTICLE II PRINCIPAL OFFICE**  
Principal street address  
3205 NW 83rd St.  
Apt. 634  
Gainesville, FL 32606

Mailing address, if different is:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**ARTICLE III PURPOSE**  
The purpose for which the corporation is organized is:  
to conduct any and all lawful business.

**ARTICLE IV SHARES**  
The number of shares of stock is: 10 shares with no par value

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

Name and Title: Stacey Stiles, Director  
Address: 3205 NW 83rd St.  
Apt. 634  
Gainesville, FL 32606

Name and Title: Stacey Stiles, Secretary  
Address: 3205 NW 83rd St.  
Apt. 634  
Gainesville, FL 32606

Name and Title: Christopher Stiles, President  
Address: 5311 Lance Loop  
Killeen, TX 76549

Name and Title: Stacey Stiles, Treasurer  
Address: 3205 NW 83rd St.  
Apt. 634  
Gainesville, FL 32606

Name and Title: Stacey Stiles, Vice President  
Address: 3205 NW 83rd St.  
Apt. 634  
Gainesville, FL 32606

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: Agents and Corporations, Inc.  
Address: 300 Fifth Avenue South, Suite 101-330  
Naples, Florida 34102

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Christopher Stiles  
Address: 5311 Lance Loop  
Killeen, TX 76549

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

By: [Signature] V.P. of Agents and Corporations, Inc. 12/30/10  
Required Signature/Registered Agent 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.

[Signature] 12/30/10  
Required Signature/Incorporator Date

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