

P 11 0000017463

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

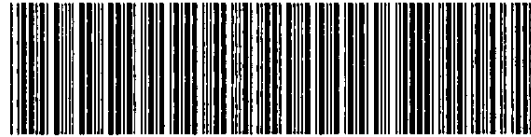
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

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2011 FEB 18 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

18 FEB 21 2011

W11-9021  
SOS

## COVER LETTER

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

SUBJECT: \_\_\_\_\_  
(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: Arlene Edwards  
Name (Printed or typed)

101 South 36th street  
Address

Mexico Beach, FL 32456  
City, State & Zip

850-648-1115  
Daytime Telephone number

arlene@pricklypears.net  
E-mail address: (to be used for future annual report notification)

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

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TALLAHASSEE, FLORIDA

# 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: Mike and Jeff Enterprises, Inc.

## **ARTICLE II PRINCIPAL OFFICE**

Principal street address  
101 s. 36th St.  
Mexico Beach, FL  
32456

Mailing address, if different is:

## **ARTICLE III PURPOSE**

The purpose for which the corporation is organized is:  
Cafe business

## **ARTICLE IV SHARES**

The number of shares of stock is: 100

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

Name and Title: Arlene Edwards/ owner  
Address: 101 S. 36th Street  
Mexico Beach, FL  
32456

Name and Title: Candi Anderson/owner  
Address: 109 Reid Ave.  
Port St. Joe, FL  
32456

Name and Title: Michael Haywood/owner  
Address: 101 S. 36th Street  
Mexico Beach, FL  
32456

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

Name and Title: Jeff Anderson/owner  
Address: 109 Reid Ave.  
Port St. Joe, FL  
32456

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

## **ARTICLE VI REGISTERED AGENT**

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

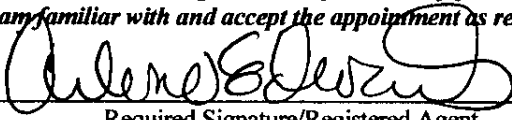
Name: Arlene Edwards  
Address: 101 S. 36th St  
Mexico Beach, FL 32456

## **ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Arlene Edwards  
Address: 101 S. 36th St  
Mexico Beach, FL 32456

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

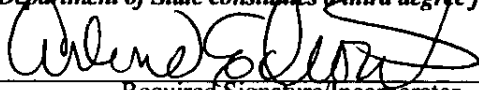


Required Signature/Registered Agent

2-09-11

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

2-09-11

Date

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