

A11000033989

(Requestor's Name)

Ms. Penny Henderson
45 Laurel Ridge Break
Ormond Beach, FL 32174



(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

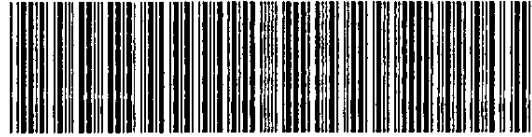
(Business Entity Name)

(Document Number)

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03/25/11--01017--008 **78.75

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11 APR -5 AM 9:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 04/07/11

W11-17908



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
11 APR -5 AM 11:29
DIVISION OF CORPORATIONS

March 30, 2011

PENNY HENDERSON
45 LAUREL RIDGE BREAK
ORMOND BEACH, FL 32174

SUBJECT: TIME OUT FROZEN YOGURT INC.
Ref. Number: W11000017908

We have received your document for TIME OUT FROZEN YOGURT INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6949.

Thomas Chang
Regulatory Specialist II
New Filing Section

Letter Number: 211A00007663

ARTICLES OF INCORPORATION

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

ARTICLE I NAMETime Out Frozen Yogurt Inc.
The name of the corporation shall be:**ARTICLE II PRINCIPAL OFFICE**Principal street address
1930 W. Granada Blvd Store #4
Ormond Beach, FL 32174

Mailing address, if different is:

45 Laurel Ridge Break
Ormond Beach, FL 32174**ARTICLE III PURPOSE**The purpose for which the corporation is organized is:
frozen yogurt store**ARTICLE IV SHARES**

The number of shares of stock is 5000

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORSName and Title: Penny Henderson - President
Address: 45 Laurel Ridge Break
Ormond Beach, FL 32174Name and Title: Elijah Henderson - V President
Address: 45 Laurel Ridge Break
Ormond Beach, FL 32174Name 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: Penny Henderson
Address: 45 Laurel Ridge Break
Ormond Beach, FL 32174**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Penny Henderson
Address: 45 Laurel Ridge Break
Ormond Beach, FL 32174

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

X Penny Henderson
Required Signature/Registered Agent4/2/11
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.

X Penny Henderson
Required Signature/Incorporator4/2/11
Date