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(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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Special Instructions to Filing Officer:

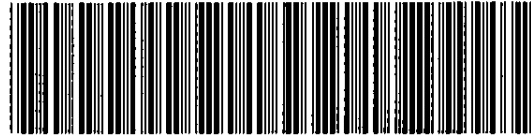
Alma G. Thomas GAVE

AUTHORIZATION BY PHONE TO
CORRECT the Number of Shares to 1

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2011 MAY 13 PM 2:30
SECRETARY OF STATE
TALLAHASSEE, FL 32399

COVER LETTER

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

SUBJECT: Barefoot Book Publishers, 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: Alma G. Thomas

Name (Printed or typed)

4620 SW 42nd St

Address

Ocala, Florida 34474

City, State & Zip

239-249-0108

Daytime Telephone number

almastone@hotmail.com

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 MAY 13 PM 2:30

FILED

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)

ARTICLE I NAME

Barefoot Book Publishers, Inc.
The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address
4620 SW 42nd St
Ocala, Florida 34474

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Providing a forum for new and struggling authors who chooses to self-publish their books, but needs assistance preparing the product for the marketplace.

ARTICLE IV SHARES

The number of shares of stock is: /

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Alma G. Thomas, President
Address: 4620 SW 42nd St
Ocala, Florida 34474

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: Alma G. Thomas
Address: 4620 SW 42nd St
Ocala, Florida 34474

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Alma G. Thomas
Address: 4620 SW 42nd St
Ocala, Florida 34474

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

Alma G. Thomas

Required Signature/Registered Agent

5/9/2011

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.

Alma G. Thomas

Required Signature/Incorporator

5/9/2011

Date

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