

P11000091066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

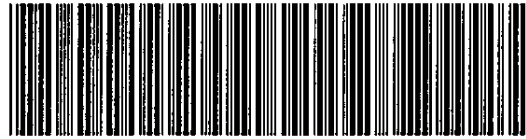
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

No copy



300213154913

10/17/11--01028--014 **70.00

FILED
2011 OCT 17 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

18 Oct 2011

COVER LETTER

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

SUBJECT: Pasco County Derby Dollz 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: Rose Frizzle

Name (Printed or typed)

1200 Starkey Road # 205-B

Address

Largo Florida 33771

City, State & Zip

727-280-7981

Daytime Telephone number

pascocountyrollerderby@gmail.com

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

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

The name of the corporation shall be: **Pasco County Derby Dollz Inc.**

ARTICLE II PRINCIPAL OFFICE

Principal street address
1200 Starkey Road # 205-B
Largo Florida 33771

Mailing address, if different is:

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV SHARES

The number of shares of stock is: **500**

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: **Sylvie Heathcock-P**
Address: **13508 Forest Lake Dr**
Largo FL 33771

Name and Title: _____
Address: _____

Name and Title: **Rose Frizzle-VP**
Address: **1200 Starkey Road # 205-B**
Largo FL 33771

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: **Rose Frizzle**
Address: **1200 Starkey Road #205**
Largo FL 33771

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: **Rose Frizzle**
Address: **1200 Starkey Road #205**
Largo FL 33771

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

10/10/2011

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.



Required Signature/Incorporator

10/10/2011

Date

FILED
2011 OCT 17 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA