

P11000094554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

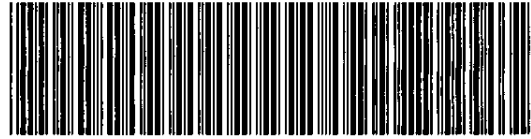
(Document Number)

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OCT 28 PM 4:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

i. Burch OCT 31 2011

COVER LETTER

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

SUBJECT: The Office, Inc.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

<input checked="" type="checkbox"/> \$70.00 Filing Fee	<input type="checkbox"/> \$78.75 Filing Fee & Certificate of Status	<input type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
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ADDITIONAL COPY REQUIRED

FROM: Billie Smith
Name (Printed or typed)

907 Mar Walt Dr. Suite 2014
Address

Fort Walton Beach, FL 32547
City, State & Zip

850-862-2728
Daytime Telephone number

Skincare@aboutface.gccoxmail.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 Office, Inc.

The name of the corporation shall be:

ARTICLE II PRINCIPAL OFFICE

Principal street address
706 Edge Street
Fort Walton Beach, Florida 32547

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: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Billie Smith, President Name and Title: _____
Address: 907 Mar Walt dr. suite 2014 Address: _____
Ft. Walton Beach, Fl 32547 _____

Name and Title: Tina Stanhope, Vice President Name and Title: _____
Address: 309 Briarwood Cir Address: _____
Ft. Walton beach, Fl 32547 _____

Name and Title: _____ Name and Title: _____
Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

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

Name: Billie Smith
Address: 329 N. Beal Pkway
Ft. Walton beach, Fl 32547

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Billie Smith
Address: 329 N. Beal Pkway
Ft. Walton Beach, Fl 32547

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

Billie Smith
Required Signature/Registered Agent

Oct 23 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.

Billie Smith
Required Signature/Incorporator

Oct 23 11
Date

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA