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(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



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COVER LETTER

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

SUBJECT:	Nan's Worldwide Nook, Inc.		
	(PROPOSED CORPORA	FE NAME – <u>MÛST INCL</u>	<u>UDE SUFFIX</u>)
Enclosed are an or	iginal and one (1) copy of the artic	eles 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 CO	PY REQUIRED
FROM: _	Robert Name	t C. Brown (Printed or typed)	
	1207 Sa	ndhurst Dr.	
	. А	address	·
	Tallahasse City,	ee, FL 32312 State & Zip	· ·
_	850-3 Daytime To	385-0285	
	r9brown@ E-mail address: (to be used		notification)
		-	

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

ARTICLES OF INCORPORATIONIn compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

ARTICLE II	PRINCIPAL OFFICE		
11(11(11))	Principal street address		Mailing address, if different is:
12	207 Sandhurst Dr.		
Iá	allahassee, FL 32312		
<u></u>			
RTICLE III I			
	ich the corporation is organized is: of the corporation is to conduct any	lawful nurnose	e or numoses
The purpose (or the corporation to to conduct any	iawiai paipoot	or purposses.
ARTICLE IV			
he number of share	es of stock is: 100		
	INITIAL OFFICERS AND/OR DIRECTO		
	le: Robert C. Brown, President/Secreta		
Address:	1207 Sandhurst Dr.		Tallahassee, FL 32312
	Tallahassee, FL 32312		Talialiassee, FL 32312
		_	
	le:		
Address:		Address:	
		_	
	le:	Name and Titl	
Address:			
		 ·	
ADDIOL D IT			
	REGISTERED AGENT ida street address (P.O. Box NOT acceptable)	of the registered ag	ent is:
Name:	Corporation Service Company		Ž4 I
Address:	1201 Hays Street		
	Tallahassee, FL 32301		子門 名
ARTICLE VII	INCORPORATOR		93 F
	ress of the Incorporator is:		
Name:	Robert C. Brown	<u> </u>	
Address:	1207 Sandhurst Dr.	<u> </u>	
_	Tallahassee, FL 32312		≥≥ ω ****
Having been name	d as registered agent to accept service of proce	ess for the above s	tated corporation at the place designated i
hiș certificate, I am	t familiar with and accept the appointment as re	egistered agent and	agree to act in this capacity
the last	TOPE Wiones Askistant VF	_	22/./.
1 / 1/2/1	ON WO KNO	עע	10/12/11
	Required Signature/Registered Axent		Date
submit this door	nent and affirm that the facts stated herein a	na turea. I ann annan	es that the folia information cubuitted in
ocument to the De	partm <u>e</u> nt of State constitutes a third degree felo	re true. I am uwar mv as provided for	e inai ine jaise injormation suomittea in in s 817.155. F.S
	PITO		, ,
	Modell C. / Series		11/9/2011
	Required Signature/Incorporator		Date
	Mane A. Brown		111912011
	1 2 12 12 12		7 7010