

P11000099852

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

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

SUBJECT: Transformation Services, 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: Natalie Amsden
Name (Printed or typed)

1033 Apollo Beach Blvd, #6
Address

Apollo Beach, FL 33572
City, State & Zip

321-945-5228
Daytime Telephone number

nataliea8881@yahoo.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)

NOT
RECORDED
AND
FILED

ARTICLE I NAME

The name of the corporation shall be:

Transformation Services, Inc

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ARTICLE II PRINCIPAL OFFICE

Principal ~~street~~ address

1033 Apollo Beach Blvd. #6

Apollo Beach, FL 33572

Mailing address, if different, is: SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

Magazine and book publishing and community workshops and events.

ARTICLE IV SHARES

The number of shares of stock is: 10

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Natalie Amsden, President

Address: 1033 Apollo Beach Blvd. #6

Apollo Beach, FL 33572

Name and Title: Natalie Amsden, Secretary

Address: 1033 Apollo Beach Blvd. #6

Apollo Beach, FL 33572

Name and Title: Natalie Amsden, Vice President

Address: 1033 Apollo Beach Blvd. #6

Apollo Beach, FL 33572

Name and Title: _____

Address: _____

Name and Title: Natalie Amsden, CFO

Address: 1033 Apollo Beach Blvd. #6

Apollo Beach, FL 33572

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: Natalie Amsden

Address: 1033 Apollo Beach Blvd. #6

Apollo Beach, FL 33572

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Natalie Amsden

Address: 1033 Apollo Beach Blvd. #6

Apollo Beach, FL 33572

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

11/15/11
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.


Required Signature/Incorporator

11/15/11
Date