

P110000103740

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

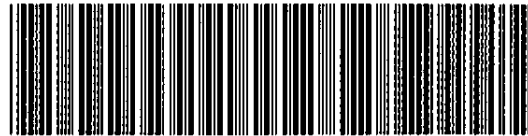
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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11 DEC -5 PM 2:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MRS  
12/6

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COVER LETTER

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

SUBJECT: The Five and Dime Dollar Store Corporation  
(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

<input checked="" type="checkbox"/> \$78.75 Filing Fee & Certified Copy	<input type="checkbox"/> \$87.50 Filing Fee, Certified Copy & Certificate of Status
no additional copy ADDITIONAL COPY REQUIRED	

FROM: Michael David Sparks  
Name (Printed or typed)

2022 Lakeview CT.  
Address

Atlantic Beach Florida 32233  
City, State & Zip

Home # 904 247-1246 - cell # 904-412-1923  
Daytime Telephone number

Southern Charities@G-mail.com  
E-mail address. (to be used for future annual report notification)

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 5, 2011

MICHAEL DAVID SPARKS  
2022 LAKEVIEW CT  
ATLANTIC BEACH, FL 32233

SUBJECT: THE DOLLAR STORE CORPORATION  
Ref. Number: W11000051437

We have received your document for THE DOLLAR STORE CORPORATION and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

You completed the wrong form. Enclosed is the profit corporation form that need to be completed and returned. Complete the form in its entirety from Article I through Article VII. The signatures are required below.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6879.

Ruby Dunlap  
Regulatory Specialist II  
New Filing Section

Letter Number: 611A00022900

RECEIVED  
DEC-5 AM 11:29  
DIVISION OF CORPORATIONS

**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: The Five and Dime Dollar Store Corporation

**ARTICLE II PRINCIPAL OFFICE**

Principal street address

Michael David Sparks  
2022 Lakeview Ct.  
Atlantic Beach Florida 32233

Mailing address, if different is:

**ARTICLE III PURPOSE**

The purpose for which the corporation is organized is: The purpose is to Buy and sell goods on the open market, thus trying to make a profit.

**ARTICLE IV SHARES**

The number of shares of stock is: 100

**ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS**

Name and Title: Michael David Sparks President  
Address: 2022 Lakeview Ct.  
Atlantic Beach Fl. 32233

Name and Title: Ruth Sparks Vice President  
Address: 2022 Lakeview Ct.  
Atlantic Beach  
Florida 32233

Name and Title: Thomas Sparks Treasurer and Secretary  
Address: 2022 Lakeview Ct.  
Atlantic Beach Fl. 32233

**ARTICLE VI REGISTERED AGENT**

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

Name: Lisa Sparks Registered Agent  
Address: 2020 Lakeview Ct.  
Atlantic Beach Fl. 32233

**ARTICLE VII INCORPORATOR**

The name and address of the Incorporator is:

Name: Michael David Sparks  
Address: 2022 Lakeview Ct.  
Atlantic Beach Fl. 32233

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

[Signature]

Required Signature/Registered Agent

Oct 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.

[Signature]

Required Signature/Incorporator

Oct 10, 2011  
Date

FILED  
11 DEC -5 PM 2:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA