P12000002038

(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:	
w.	





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01/06/12--01022--004 **87.50



J. Stilvers JAN 0 9 MM.

COVER LETTER

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

SUBJECT: Fromida Wild Bees,	INC dba- A Abela Sting operation
(PROPOSED CORPORAT	E NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the artic	les of incorporation and a check for:
\$70.00 \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROM: Mills, Rame (
10867 Country	
Lakeland F	C 33809
813-381-	2337 E E
f Loridawild B	ephone number Pees a a a c com 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)

The name of the corporation shall be: Florida wild Bees, INC	
ARTICLE II PRINCIPAL OFFICE Principal street address 10867 Country Haven Or Calceland F1 33849 Pl 363-858-7146	s, if different is:
ARTICLE III PURPOSE	, , , , , , , , , , , , , , , , , , , ,
The purpose for which the corporation is organized is: Conservation And Of Florida Will Especially— Ho	Helocorion Idlife ney Bees
ARTICLE IV SHARES 1000 0 1100 Each The number of shares of stock is:	
Name and Title: Kay mund f m 1/15 Name and Title: Address: 10867 Country Haw De Address: 12 Kelland f 1 3389	
Name and Title: Address: Address: Name and Title: Address:	
ARTICLE VI REGISTERED AGENT	20 TAL
The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:	7
Name: Frynand f Mills Address: Country Haven Or Cakeland Fl 33809	JAN -6
ARTICLE VII INCORPORATOR	
Name: Address: Name: Address: Address: Name: Address: Address: Name: Address: Name: Address: Ad	4
Having been named as registered agent to accept service of process for the above stated corporation this certificate, I am familiar with and accept the appointment as registered agent and agree to act in	n at the place designated in this capacity
Lange & Mels	2 Nd Jan Jull
Required Signature/Registered Agent	Date
I submit this document and affirm that the facts stated herein are true. I am aware that the false document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.	\$
Required Signature/Incorporator	2nd Jan 2011