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02

COVER LETTER

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

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SUBJECT: Anne DeStout & Asso	ciates, Inc.
(PROPOSED CORPOR	ATE NAME – <u>MUST INCLUDE SUFFIX</u>)
Enclosed are an original and one (1) copy of the ar	ticles of incorporation and a check for:
\$70.00 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy & Certificate of Status ADDITIONAL COPY REQUIRED
FROм: Anne DeStout	
Nam	e (Printed or typed)
1509 Lee Cout	Address
	Address
Lake Worth, Florida 33	3461 , State & Zip
561 236-9576	Telephone number
Daytine	retephone number
destoutreporting@gmail E-mail address: (to be use	.com ed 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)

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

			DIAISION OF CORPORATIO
ARTICLE I	NAME Anne DeStout & Association shall be:	iates, Inc.	12 EED 0 DV 0 0
The name of the	corporation shall be:		12 FEB -8 PM 2: 02
ARTICLE II	PRINCIPAL OFFICE		
•	Principal <u>street</u> address 1509 Lee Court		Mailing address, if different is:
	Lake Worth, Florida 33461		
ARTICLE III	PURPOSE		
	which the corporation is organized is: al Corporation"		
<i>ARTICLE IV</i> The number of sl	SHARES hares of stock is: 500		
	INITIAL OFFICERS AND/OR DIRECTO Title: Anne DeStout, President		le Louis DeStout Vice President
Address:		Address:	1509 Lee Court
	Lake Worth, Florida 33461		Lake Worth, Florida 33461
Name and Address:	Title:	Name and Tit	
Address.		Address.	
Name and	Title:	Name and Tit	le:
Address:	 	Address:	
		_	
ARTICLE VI	REGISTERED AGENT		
	Florida street address (P.O. Box NOT acceptable)	of the registered ag	gent is:
Name:	Anne DeStout		
Address:	1509 Lee Court		
	Lake Worth, Florida 33461		
	INCORPORATOR		
The name and a Name:	ddress of the Incorporator is:		
Address:	Anne DeStout 1509 Lee Court	_	
Addiess.	Lake Worth, Florida 33461	_ 	
	med as registered agent to accept service of proce am familiar with and accept the appointment as re		
Unn	Required Signature/Registered Agent		2/5/2012
	required Signature/registered Agent		Date
l submit this do	cument and affirm that the facts stated herein a	re true. I am awa	re that the false information submitted in a

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.

Paguinad Clanatura/Incorporator

2/5/2012