

P12000018969

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FL 32304

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SECRETARY OF STATE
TALLAHASSEE, FL 32304

COVER LETTER

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

SUBJECT: Renee' Therrien's 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: Renee' Therrien

Name (Printed or typed)

11125 Nome Avenue

Address

Port Richey, FL 34668

City, State & Zip

727 379 6510

Daytime Telephone number

xxxreneexxx@yahoo.com

E-mail address: (to be used for future annual report notification)

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

RENEE' THERRIEN

11125 Nome Avenue
Port Richey, FL 34668
727 379 6510 Ph
727 639 2015 C

February 20, 2012

To whom it may concern,

I have no intention on reinstating Renee' Therrien's Inc. re: P10000099446. I am releasing the name.

Please find enclosed the cover letter, check for \$70.00 to cover the filing fee and 2 copies of the Articles of Incorporation.

Please call me on my cell phone if there are any questions or concerns. Thank you in advance for you time in this matter.

Sincerely,


Renee' Therrien

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

ARTICLE I NAME Renee' Therrien's Inc.
The name of the corporation shall be:

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ARTICLE II PRINCIPAL OFFICE
Principal street address
2469 Sunset Point Rd #200
Clearwater, FL 33765

Mailing address, if different is:
11125 Nome Avenue
Port Richey, FL 34668

ARTICLE III PURPOSE
The purpose for which the corporation is organized is:
a Professional Corporation

ARTICLE IV SHARES
The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Renee' Therrien
Address: 11125 Nome Avenue
Port Richey, FL 34668

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

Name and Title: _____
Address: _____

ARTICLE VI REGISTERED AGENT

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

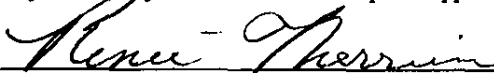
Name: Renee' Therrien
Address: 11125 Nome Avenue
Port Richey, FL 34668

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: Renee' Therrien
Address: 11125 Nome Avenue
Port Richey, FL 34668

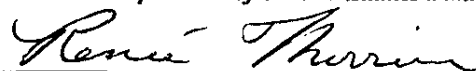
Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity



Required Signature/Registered Agent

_____ 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

_____ Date